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Fill in this in	formation to i	dentify your case:		
Debtor 1	Pirst Name	Yuvonae Middle Name	Barrere	<u> </u>
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Sankruptcy Cour	t for the: Eastern District	of Virginia	
Case number	17-31 (If known)	1424		

Array San June

2017 MAR 27 AH 11: 47

J.S. BAHKRUPTCY COURT RICHMOND DIVISION

☐ Check if this is an amended filing

	upplying correct
information. Fill out all of your schedules first; then complete the information on this form. If you are filling amended so your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$ <u>Ø</u>
1b. Copy line 62, Total personal property, from Schedule A/B	\$
1c. Copy line 63, Total of all property on Schedule A/B	
Part 2: Summarize Your Liabilities	
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	Your liabilities Amount you owe
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$
Your total liabilities	\$
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	<i>2407.</i> °
5. Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22c of Schedule J	\$2407.0 \$2689.94

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Case number (if known)\_\_\_

Pist Name Midde Name Last Name

Р	art 4: Answer These Questions for Administrative and Statistical Records	<b>.</b>	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
	No. You have nothing to report on this part of the form. Check this box and submit this formation and the submit the subm		er schedules.
7.	What kind of debt do you have?	- vie	
	Your debts are primarily consumer debts. Consumer debts are those "incurred by are family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.	n individual primarily for a pers oses. 28 U.S.C. § 159.	sonal,
	Your debts are not primarily consumer debts. You have nothing to report on this parthis form to the court with your other schedules.	t of the form. Check this box a	and submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ocome from Official	:2322
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	(Billippin variables of country to (a) year which is a store of the Wale of	
		Total claim	
	From Part 4 on Schedule E/F, copy the following:		
	9a. Domestic support obligations (Copy line 6a.)	\$	-
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	-
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	-
	9d. Student loans. (Copy line 6f.)	\$	-
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	-
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$	-
	9g. Total. Add lines 9a through 9f.	\$ B	.]

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Fill in this information to identify your case and this	filing:		
Debtor 1 Ainhi Vuvanne <	Barrera		
First Name Middle Name Debtor 2	Last Name		
(Spouse, if filing) First Name Middle Name  United States Bankruptcy Court for the: Eastern District of V	Last Name		
Case number		_	
			Check if this is an amended filing
Official Form 106A/B			•
Schedule A/B: Property	v		12/15
In each category, separately list and describe items category where you think it fits best. Be as comple responsible for supplying correct information. If me write your name and case number (if known). Answers	s. List an asset only once. If an asset fits in more te and accurate as possible. If two married people ore space is needed, attach a separate sheet to this	are filing together, bo is form. On the top of a	th are equally
Do you own or have any legal or equitable interest			
No. Go to Part 2.			
☐ Yes. Where is the property?	What is the property? Check all that apply.	Do not deduct secured cis	ims or exemptions. Put
1.1.	☐ Single-family home ☐ Duplex or multi-unit building	the amount of any secure Creditors Who Have Clain	d claims on Schedule D:
Street address, if available, or other description	Condominium or cooperative	Current value of the	Current value of the
	☐ Manufactured or mobile home ☐ Land	entire property?	portion you owπ? «
	☐ Investment property	Describe the nature of	f your ownership
City State ZIP Code	☐ Timeshare ☐ Other	interest (such as fee the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one.		
	Debtor 1 only Debtor 2 only		
County	Debtor 1 and Debtor 2 only	Check if this is co (see instructions)	mmunity property
		, ,	
Maria de la companya	property identification number:		
If you own or have more than one, list here:	What is the property? Check all that apply.	Do not deduct secured cla	ims or exemptions. Put
1.2.	☐ Single-family home ☐ Duplex or multi-unit building	the amount of any secure Creditors Who Have Clair	ns Secured by Property.
Street address, if available, or other description	☐ Condominium or cooperative ☐ Manufactured or mobile home		Current value of the portion you own?
	Land	\$	\$
City State ZIP Code	☐ Investment property ☐ Timeshare	Describe the nature of interest (such as fee	
City State ZIP Code	Other	the entireties, or a life	
	Who has an Interest in the property? Check one.  Debtor 1 only		
County	Debtor 2 only		
<b>-</b>	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is co	mmunity property
	Other information you wish to add about this ite	,	
	property identification number:		

Document Page 4 of 62 Tikki Yuronne of Debtor 1 Case number (if kno What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? Manufactured or mobile home Land Investment property Describe the nature of your ownership City ZIP Code Timeshare interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. 3.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions)

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Debtor 1

Dinki	Ywonne	Barrera
Piret Name	Middle Name	l set Name

Case number (if known)\_\_\_\_\_

3.3.	Make:	Who has an interest in the property? Check one.  ☐ Debtor 1 only ☐ Debtor 2 only	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule D:
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
	Other information:			
		☐ Check if this is community property (see instructions)	\$	\$
3.4.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secure	
	Model:	Debtor 1 only	Creditors Who Have Clain	ns Secured by Property.
	Year:	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
	Other information:	At least one or the deptors and another		
	Cuter information.	Check if this is community property (see instructions)	\$	\$
Exan N Y	lo les			
Z N		Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured dathe amount of any secure Creditors Who Have Claim  Current value of the entire property?	d claims on Schedule Dans Secured by Property.  Current value of the portion you own?
N O Y	Make: Model: Year:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the
4.1.	Make: Model: Year:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)	the amount of any secure Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?
A.1.	Make: Model: Year: Other information:	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see	the amount of any secure Creditors Who Have Clair.  Current value of the entire property?  \$  Do not deduct secured clair.	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
A.1.	Make: Model: Other information: Own or have more than one, list here:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)  Who has an interest in the property? Check one. □ Debtor 1 only	the amount of any secure Creditors Who Have Clair  Current value of the entire property?	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
A.1.	Make:  Model: Year: Other information:  a own or have more than one, list here: Make: Model:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)  Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only	the amount of any secure Creditors Who Have Clair.  Current value of the entire property?  \$ Do not deduct secured dathe amount of any secure Creditors Who Have Clair.	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$ aims or exemptions. Put d claims on Schedule D: ns Secured by Property.
A.1.	Make: Model: Other information:  I own or have more than one, list here: Make: Model: Year: Year: Year:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)  Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clair.  Current value of the entire property?  \$  Do not deduct secured clathe amount of any secure	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$ aims or exemptions. Put d claims on Schedule D: ns Secured by Property.
A.1.	Make:  Model: Year: Other information:  a own or have more than one, list here: Make: Model:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)  Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only	the amount of any secure Creditors Who Have Clair.  Current value of the entire property?  \$	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$ aims or exemptions. Put d claims on Schedule D: ns Secured by Property.  Current value of the
A.1.	Make: Model: Other information:  I own or have more than one, list here: Make: Model: Year: Year: Year:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)  Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clair.  Current value of the entire property?  \$	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$ aims or exemptions. Put d claims on Schedule D: ns Secured by Property.  Current value of the
4.1.  If you 4.2.	Make:  Model: Year:  Other information:  wown or have more than one, list here:  Make:  Model: Year:  Other information:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)  Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see	the amount of any secure Creditors Who Have Clair.  Current value of the entire property?  \$  Do not deduct secured dathe amount of any secure Creditors Who Have Clair.  Current value of the entire property?  \$	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$ aims or exemptions. Put d claims on Schedule D: ns Secured by Property.  Current value of the

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Debtor 1

Mikhi Vuranne Barrera Fist Name Node Name Last Name

Case number (#known)\_\_\_\_\_

Do	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
6.	Household goods and furnishings	
	Examples: Major appliances, furniture, linens, china, kitchenware	
	Yes, Describe	\$
7.	Electronics	<del>-</del> —
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	No	
	☐'Yes. Describe	\$
8.	Collectibles of value	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	Yes. Describe	\$
9.	Equipment for sports and hobbles	or annual and a constraint or a state of the
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	M No	***************************************
	☐ Yes. Describe	\$
10.	Firearms  Examples: Pistols, rifles, shotguns, ammunition, and related equipment  No  Yes, Describe	\$
11.	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	Yes, Describe	\$
12.	Jewelry	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	Yes, Describe	\$
13.	Non-farm animals	
	Examples: Dogs, cats, birds, horses  No	***************************************
•	Yes, Describe	\$
14	Any other personal and household items you did not already list, including any health aids you did not list	
	Yes, Give specific information	\$
	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	s
	1VI 1 VI 1V. TITLE UIGLIIUIINDI IIDIS	<i>-</i>

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Debtor 1

Dikk:	Ywon	e B	Amero
First Name	Middle Name	Last Name	<del>*</del>

Case number (if known)

Do you own or have any	y legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. <b>Cash</b> Examples: Money you	u have in your wallet, in your home, in a safe deposit box, and on hand when you file y	our petition
□ No		
	Cat	sh: \$ <u>.50.</u> °
and other	savings, or other financial accounts; certificates of deposit; shares in credit unions, br similar institutions. If you have multiple accounts with the same institution, list each.	okerage houses,
No Pes	Institution name:	
	17.1. Checking account:	\$
	17.2. Checking account:	\$
	17.3. Savings account:	\$
	17.4. Savings account:	\$
	17.5. Certificates of deposit:	\$
	17.6. Other financial account:	s
	17.7. Other financial account:	· · · · · · · · · · · · · · · · · · ·
	17.8. Other financial account:	
	17.9. Other financial account:	<u> </u>
	s, or publicly traded stocks s, investment accounts with brokerage firms, money market accounts	
☐ Yes	Institution or issuer name:	
		\$
		\$
		<u> </u>
	stock and interests in incorporated and unincorporated businesses, including a	an Interest in
19. Non-publicly traded an LLC, partnership	o, and joint venture	an Interest in of ownership:
an LLC, partnership	Name of entity: % 6	of ownership:
an LLC, partnership	Name of entity: % 0	of ownership: % \$

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Debtor 1

Ľ	NKK	i Yuro	nne G	Barrera
Frat	Name	Middle Name	Lest Name	

Case number	(if known)			

/			
No Yes. Give specific	Issuer name:		
information about them	<u></u>		_ \$
			- \$
	<u> </u>		- \$
tirement or pension amples: Interests in II		401(k), 403(b), thrift savings accounts, or other pension or profit-sharing pla	ns
Yes. List each			
account separately.	Type of account:	Institution name:	
	401(k) or similar pla	n:	<u> </u>
	Pension plan:		
	IRA:		<u> </u>
	Retirement account		\$
	Keogh:		\$
	Additional account:		_
			\$
ur share of all unused	d deposits you have	made so that you may continue service or use from a company	. \$ . \$
ur share of all unused amples: Agreements	<b>prepayments</b> d deposits you have		
ur share of all unused amples: Agreements npanies, or others	prepayments d deposits you have with landlords, prep	made so that you may continue service or use from a company	
ur share of all unused amples: Agreements npanies, or others No	prepayments d deposits you have with landlords, prep	made so that you may continue service or use from a company vaid rent, public utilities (electric, gas, water), telecommunications	
ur share of all unused amples: Agreements appanies, or others No	prepayments d deposits you have with landlords, prep Electric: Gas:	made so that you may continue service or use from a company vaid rent, public utilities (electric, gas, water), telecommunications	
ar share of all unused amples: Agreements appanies, or others No	prepayments d deposits you have with landlords, prep Electric: Gas: Heating oil:	made so that you may continue service or use from a company vaid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:	
r share of all unused imples: Agreements inpanies, or others No	prepayments d deposits you have with landlords, prep Electric: Gas: Heating oil: Security deposit on	made so that you may continue service or use from a company vaid rent, public utilities (electric, gas, water), telecommunications	\$\$ - \$\$
ar share of all unused amples: Agreements appanies, or others No	prepayments d deposits you have with landlords, prepare Electric: Gas: Heating oil: Security deposit on Prepaid rent:	made so that you may continue service or use from a company vaid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:	\$\$ - \$\$
or share of all unused comples: Agreements opanies, or others No	prepayments d deposits you have with landlords, prep Electric: Gas: Heating oil: Security deposit on	made so that you may continue service or use from a company vaid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:	\$\$\$\$\$\$\$\$
ur share of all unused amples: Agreements npanies, or others No	prepayments d deposits you have with landlords, prep Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone:	made so that you may continue service or use from a company vaid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:	\$\$ - \$\$
ur share of all unused amples: Agreements npanies, or others No	prepayments d deposits you have with landlords, prepare Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water:	made so that you may continue service or use from a company vaid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:	\$\$\$\$\$\$\$\$
ur share of all unused amples: Agreements npanies, or others No	prepayments d deposits you have with landlords, prep Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water: Rented furniture:	made so that you may continue service or use from a company vaid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:	\$\$\$\$\$\$\$\$
ur share of all unused amples: Agreements impanies, or others. No Yes	prepayments d deposits you have with landlords, prep Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water: Rented furniture: Other:	made so that you may continue service or use from a company vaid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:	\$\$\$\$\$\$\$\$
amples: Agreements mpanies, or others  No Yes	prepayments d deposits you have with landlords, prep Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water: Rented furniture: Other:	made so that you may continue service or use from a company paid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:  rental unit:  rental unit:	\$\$\$\$\$\$\$\$

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abtor 1 Oikki Hvonce Barre First Name Modele Name Last Name	16	Case number (if known)	
Interests in an education IRA, in an account in a qualified Al 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).  No  Yes		under a qualified state tuition progran e records of any interests.11 U.S.C. § 52	
institution name and description.	. Separately life the	e records of any interests. 11 0.3.0, § 32	n(c).
		<u> </u>	_ \$
			- \$ - \$
Trusts, equitable or future interests in property (other than a exercisable for your benefit	anything listed in	line 1), and rights or powers	
Yes. Give specific information about them			\$
Examples: Internet domain names, websites, proceeds from roy  No  Yes. Give specific information about them	raities and licensin	g agreements	\$
Licenses, franchises, and other general intangibles  Examples: Building permits, exclusive licenses, cooperative asso  No  Yes. Give specific	ociation holdings, l	liquor licenses, professional licenses	
information about them			\$
oney or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
Tax refunds owed to you No			
See Give specific information about them, including whether		Federal:	\$
you already filed the returns		State:	\$
and the tax years.		Local:	\$
Family support  Examples: Past due or lump sum alimony, spousal support, child  No	d support, mainten	ance, divorce settlement, property settle	ment
Yes. Give specific information		Alimony:	œ.
		Maintenance:	\$ \$
		Support:	*

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No Yes. Give specific information	
	\$

Divorce settlement: Property settlement: Case 17-31424-KRH Doc 16 Filed 03/27/17 Entered 03/27/17 12:35:05 Desc Main Document Page 10 of 62

Debtor 1

nihhi	Vuo	nne	BF	mer	عـــ
First Name	Middle Name	1 20	t Name		

Case number (if known)\_\_\_\_\_

<b>31</b> .	Interests in Insurance policies  Examples: Health, disability, or life insurance No	ce; health savings account (H	ISA); credit, homeowner's, or renter's insurance	
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
				\$
				\$
				\$
32.	Any interest in property that is due you of it you are the beneficiary of a living trust, exproperty because someone has died.  No  Yes. Give specific information		d urance policy, or are currently entitled to receive	\$
33.	Claims against third parties, whether or Examples: Accidents, employment disputes  No	•		_
	Yes. Describe each claim			\$
34.	Other contingent and unliquidated claim to set off claims	s of every nature, including	counterclaims of the debtor and rights	
	Yes. Describe each claim.			
	Any financial assets you did not already No Yes. Give specific information			\$
36.	Add the dollar value of all of your entries for Part 4. Write that number here		→ entries for pages you have attached	\$
				A
Pa	rt 5: Describe Any Business-F	Related Property You	Own or Have an Interest In. List any re	eal estate in Part 1.
	Do you own or have any legal or equitab	le Interest in any business-	related property?	
4	No. Go to Part 6.  Yes. Go to line 38.			
				Current value of the portion you own?  Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions yo	u already earned		
	No No			<b>"</b>
	Yes. Describe			\$
39.	Office equipment, furnishings, and supp Examples: Business-related computers, software		nachines, rugs, telephones, desks, chairs, electronic devices	
	Yes. Describe			\$

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Debtor 1 <u>Dikki Vvo ne Barneja</u>

First Name Middle Name Last Name

Case number (if known)

☑ No		
y	- ^	
Yes. Describe	<b>\$</b>	
ventory		
No		
Yes. Describe	<u> </u>	
nterests in partnerships or joint ventures		
<b>〕</b> №		
Yes. Describe Name of entity:	% of ownership:	
	% \$	
Yes. Do your lists include personally identifiable information (as d  No  Yes. Describe	<b>\$_</b>	
ny business-related property you did not already list		
1 No		
Yes. Give specific	\$	
Information		
	<u> </u>	
	\$	
	*	
dd the dollar value of all of your entries from Part 5, including any e		
	······································	
r Paπ 5. Write that number here		e e esca de
r part 5. Write that number here	, ,	
r Part 5. Write that number here	,	
6: Describe Any Farm- and Commercial Fishing-Related	Property You Own or Have an Interest In.	
	Property You Own or Have an Interest In.	
6: Describe Any Farm- and Commercial Fishing-Related If you own or have an interest in farmland, list it in Part 1.		
Describe Any Farm- and Commercial Fishing-Related if you own or have an interest in farmland, list it in Part 1.  you own or have any legal or equitable interest in any farm- or con		
G: Describe Any Farm- and Commercial Fishing-Related If you own or have an interest in farmland, list it in Part 1.  you own or have any legal or equitable interest in any farm- or con No. Go to Part 7.		
6: Describe Any Farm- and Commercial Fishing-Related If you own or have an interest in farmland, list it in Part 1.  you own or have any legal or equitable interest in any farm- or con No. Go to Part 7.	nmercial fishing-related property?	
6: Describe Any Farm- and Commercial Fishing-Related If you own or have an interest in farmland, list it in Part 1.  2 you own or have any legal or equitable interest in any farm- or continuous No. Go to Part 7.	nmercial fishing-related property?	ent value of the
6: Describe Any Farm- and Commercial Fishing-Related If you own or have an interest in farmland, list it in Part 1.  you own or have any legal or equitable interest in any farm- or con No. Go to Part 7.	nmercial fishing-related property?  Curr port	ion you own?
Describe Any Farm- and Commercial Fishing-Related If you own or have an interest in farmland, list it in Part 1.  you own or have any legal or equitable interest in any farm- or con No. Go to Part 7.  Yes. Go to line 47.	nmercial fishing-related property?  Curr port	ion you own?
Describe Any Farm- and Commercial Fishing-Related If you own or have an interest in farmland, list it in Part 1.  you own or have any legal or equitable interest in any farm- or con No. Go to Part 7.  Yes. Go to line 47.	nmercial fishing-related property?  Curr port	ion you own? of deduct secured cla
Describe Any Farm- and Commercial Fishing-Related If you own or have an interest in farmland, list it in Part 1.  Describe Any Farm- and Commercial Fishing-Related If you own or have an interest in farmland, list it in Part 1.  Describe Any Farm- and Commercial Fishing-Related If you own or have an interest in farmland in farm- or configuration.  No. Go to Part 7.  Yes. Go to line 47.	nmercial fishing-related property?  Curr port	ion you own? of deduct secured cla
Describe Any Farm- and Commercial Fishing-Related If you own or have an interest in farmland, list it in Part 1.  you own or have any legal or equitable interest in any farm- or continuous No. Go to Part 7.  Yes. Go to line 47.	nmercial fishing-related property?  Curr port	ion you own? of deduct secured cla
	nmercial fishing-related property?  Curr port	ion you own? ot deduct secured clai

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Debtor 1 Aik Ki Vivanne Barrice Case number (# known)	<del></del>
48. Crops—either growing or harvested	
☐ No ☐ Yes. Give specific information	s
49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No Yes	7
	\$
50. Farm and fishing supplies, chemicals, and feed  No Yes	٦
	\$
51. Any farm- and commercial fishing-related property you did not already list	7
☐ Yes. Give specific information	\$
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above  53. Do you have other property of any kind you dld not already list?  Examples: Season tickets, country club membership  No	\$
Yes. Give specific information	\$ \$
54. Add the dollar value of all of your entries from Part 7. Write that number here	\$
Part 8: List the Totals of Each Part of this Form	
55. Part 1: Total real estate, line 2	<u>, Ø</u>
56. Part 2: Total vehicles, line 5	
57. Part 3: Total personal and household items, line 15	
58. Part 4: Total financial assets, line 36	
59. Part 5: Total business-related property, line 45 \$	
50. Part 6: Total farm- and fishing-related property, line 52	
61. Part 7: Total other property not listed, line 54 +\$	
62. <b>Total personal property.</b> Add lines 56 through 61	+\$
53. Total of all property on Schedule A/B, Add line 55 + line 62	\$

Official Form 106A/B

Schedule A/B: Property

page 10

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Fill in this information to identify your case:			
Debtor 1 Nikk; Ywone	Barrera		
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Eastern District			
Case number			☐ Check if this is an
			amended filing
Official Form 106C			
Schedule C: The Prop	erty You	Claim as Exempt	04/16
Be as complete and accurate as possible. If two mai Using the property you listed on <i>Schedule A/B: Prop</i> space is needed, fill out and attach to this page as myour name and case number (if known).	erty (Official Form 106A	/B) as your source, list the property that y	ou claim as exempt. If more
For each item of property you claim as exempt, y specific dollar amount as exempt. Alternatively, of any applicable statutory limit. Some exemption retirement funds—may be unlimited in dollar amulimits the exemption to a particular dollar amount would be limited to the applicable statutory amounts.	you may claim the full ns—such as those for ount. However, if you it and the value of the	fair market value of the property being health aids, rights to receive certain b claim an exemption of 100% of fair ma	g exempted up to the amount enefits, and tax-exempt rket value under a law that
Part 1: Identify the Property You Claim	as Exempt		
<ol> <li>Which set of exemptions are you claiming?</li> <li>You are claiming state and federal nonbank</li> <li>You are claiming federal exemptions. 11 U</li> <li>For any property you list on Schedule A/B the</li> </ol>	sruptcy exemptions. 11 .S.C. § 522(b)(2)	U.S.C. § 522(b)(3)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Constant Z and new the property	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:	\$	<b></b>	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	<b>\$</b>	<b></b>	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<u></u> \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
3. Are you claiming a homestead exemption of		Shadow and the date of Alexander	
(Subject to adjustment on 4/01/19 and every 3 No	years after that for case	s lileu on or after the date of adjustment.)	1
Yes. Did you acquire the property covered	by the exemption within	1,215 days before you filed this case?	
☐ No ☐ Yes			

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Debtor 1

nikh	Wonne Middle Name	Barrere
First Name	Middle Name	Last Name

Case number (#known)	

Part 2:	Additio

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
-	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$ 100% of fair market value, up to any applicable statutory limit	
Schedule A/B: ——— Brief			
description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	<b>\$</b>	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description:	<u> </u>	_ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your cas	е:			
O.KK VICE	a Passa			
Debtor 1 / / / / / / / / / / / / / / / / / /	Ame Last Name			
Debtor 2 (Spouse, if filing) First Name Middle N	ame Last Name			
United States Bankruptcy Court for the: Eastern [	eistrict of Virginia			
Case number(if known)			☐ Check	if this is an
(II Kilomi)			•	ed filing
Official Farms 400D				
Official Form 106D	- Wha Have Claims Secure	ad by Duam		
	s Who Have Claims Secur			12/15
	If two married people are filing together, both are ed the Additional Page, fill it out, number the entries,			
additional pages, write your name and cas			•	•
1. ¿Do any creditors have claims secured b	y your property?			
<b>1</b>	n to the court with your other schedules. You have nothing	ng else to report on th	nis form.	
Yes. Fill in all of the information below.				
Part 1: List All Secured Claims				
All the Blot All Gooding Glassio		Column A	Column B	Golumn C
	ore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2.	Amount of claim	Value of collateral	Unsecured
	abetical order according to the creditor's name.	Do not deduct the value of collateral,	that supports this claim	portion If any
2.1	Describe the property that secures the claim:	•		* //*//* ** `
Creditor's Name	Describe the property that secures the claim.	]	*	Φ
1				
Number Street	As of the date you file, the claim is: Check all that apply.	J		
	☐ Contingent			
	Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	<ul> <li>An agreement you made (such as mortgage or secured car joan)</li> </ul>			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	-		
community debt				
Date debt was incurred	Last 4 digits of account number			
Creditor's Name	Describe the property that secures the claim:	\$	\$	\$
Number Street	As of the data you file the staim is: Check all that each	ļ		
:	As of the date you file, the claim is: Check all that apply.  Contingent			
	Untiquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan)  Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
	Other (including a right to offset)	-		
Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries in 0	Column A on this page. Write that number here:	\$	_	

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Document Page 16 of 62 Debtor t Case number (if known) Column A Column 8 Column C

Amount of claim Velue of collateral Unsecured portion

that supports this portion

claim If any **Additional Page** Part 1: After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply.

	City State ZIP Code	Unliquidated Disputed	
	Who owes the debt? Check one.	Nature of lien. Check all that apply.	į
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)	
	Date debt was incurred	Last 4 digits of account number	- T
	Creditor's Name	Describe the property that secures the claim: \$\$\$	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	AAAA
	Who owes the debt? Check one.	Nature of lien. Check all that apply.	
	Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)	
	Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)	
	At least one of the debtors and another	Judgment lien from a lawsuit	
	☐ Check if this claim relates to a community debt	Other (including a right to offset)	
	Date debt was incurred	Last 4 digits of account number	
	Creditor's Name	Describe the property that secures the claim: \$\$	
1	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
	Who owes the debt? Check one.	Nature of lien. Check all that apply.	
	Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)	
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit	
	At least one of the debtors and another	Other (including a right to offset)	
	<ul> <li>Check if this claim relates to a community debt</li> </ul>		
	Date debt was incurred	Last 4 digits of account number	
	Add the dollar value of your entries	s in Column A on this page. Write that number here: s	
	If this is the last page of your form, Write that number here:	, add the dollar value totals from all pages.	***
	Official Form 106D Additional P	age of Schedule D: Creditors Who Have Claims Secured by Property page of	

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Debtor 1

1	Dikki.	Ywonne.	Barrera
100	of Alegae	Midde Name	Last Marie

Case number (if known)\_\_\_\_\_

Us ag	se this pag- lency is try u have mo	e only if you have oti ing to collect from your re than one creditor	ou for a debt you owe to	your bankruptcy for someone else, list th you listed in Part 1, I	a debt that you already listed in Part 1. For example, if a collection e creditor in Part 1, and then list the collection agency here. Similarly, if ist the additional creditors here. If you do not have additional persons to
					On which line in Part 1 dld you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			-
	Humber	Succi			
				·	-
	City		State	ZIP Code	
		* 479 67 ALEAN P. CO.		か・1 *** Andrew As 1 3 / Assembly State Common A	On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street		···	-
	Hombor	Gueet			
					-
	City		State	ZIP Code	-
	hilisin jarohika jarohan melemus nyaé menen	Ministrative and their as is an exercise to be a	* * * * *** / * **********************	mga Yenningarina e elektro e e e e e e e e e e e e e e e e e e e	On which line in Part 1 did you enter the creditor?
	Name	<del></del>			Last 4 digits of account number
	Number	Street			-
	Mulliper	Sueet			
					-
	City		State	ZIP Code	-
_	Canadania amin'ny fivo	MRNARAGA, OSE EL E AM E T E MANAGEMES III	ann a saithean a said. Mhí airinte 1976 a chuil 164 maí 164 maí 164 a <b>"Saite</b> Altha	AN AMERICAN PROPERTY OF THE PR	On which line in Part 1 did you enter the creditor?
	Name	<u> </u>	<u> </u>		Last 4 digits of account number
	M				_
	Number	Street			
					-
	City		State	ZIP Code	-
		the Billion Communications and the Silvin Communication of	is an extraction to the control of the same and accommission of the	AND CONTRACTOR OF THE PARTY OF	On which line in Part 1 did you enter the creditor?
	Name		<del></del>		Last 4 digits of account number
	Number	Street	<u>-</u>		-
	Muniber	Street			
					-
	City		State	ZIP Code	-
$\Box$	AC 000/400000	· ettagen delse contant = n	n ( a Cundury viii ) — V ( Successioninicaessionininicaessioninini	andro-Alle Sandaning Servez veda (* 1842 z. 192	On which line in Part 1 did you enter the creditor?
	Name	<u> </u>	·	· <del></del>	Last 4 digits of account number
			<del></del> -		-
	Number	Street			
					-
	City		State	ZIP Code	-

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Fill in this information to identify your case:				
Debtor 1 Dikhi Wone	Barrera			
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name			
United States Bankruptcy Court for the: Eastern District of	Virginia			
Case number(if known)				k if this is an
Official Form 106E/F				
Schedule E/F: Creditors W	ho Have Unsecured Clain	ns		12/15
Be as complete and accurate as possible. Use Part			NONDOIODIT	
List the other party to any executory contracts or un A/B: Property (Official Form 106A/B) and on Scheducreditors with partially secured claims that are listeneeded, copy the Part you need, fill it out, number to any additional pages, write your name and case nur	nexpired leases that could result in a claim. Also ilstife G: Executory Contracts and Unexpired Leases (of in Schedule D: Creditors Who Have Claims Securate entries in the boxes on the left. Attach the Continuer (If known).	st executory co Official Form 1 red by Property	ontracts on Se 06G). Do not /. If more space	chedule Include any ce Is
Part 1: List All of Your PRIORITY Unsecure	d Claims		<u> </u>	
1. Do any creditors have priority unsecured claims  No. Go to Part 2.	against you?			
Yes.	differ has more than one priority unconvered stairs. But the	ha araditar aans	rotati for anali	. alaim Fan
nonpriority amounts. As much as possible, list the ci	color has more than one phonty unsecured trains, list the iclaim has both priority and nonpriority amounts, list the aims in alphabetical order according to the creditor's n. Part 1. If more than one creditor holds a particular claim	at claim here ar ame. If you have	nd show both p e more than tw	priority and
(For an explanation of each type of claim, see the in	-	i, list the other c	reultors in Fai	t 3.
		Total claim	Priority	Nonpriority
21 76 /4		* * * * * * * * * * * * * * * * * * * *	amount . "	amount
Priority Creditor's Name	Last 4 digits of account number	\$	_ \$	_ \$
7310 Stapes Milb rd	When was the debt incurred?			
Prichmond VA 23228	As of the date you file, the claim is: Check all that apply	,		
City State ZIP Code	☐ Contingent			
Who incurred the debt? Check one.	Unliquidated			
Debtor 1 only	Disputed			
Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Domestic support obligations			
☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the government  Claims for death or personal injury while you were			
Is the claim subject to offset?	Claims for death or personal injury while you were intoxicated			•
□ No	Other. Specify Oan			
Yes				<u> </u>
2.2 Prichmond City Of lities Priority Creditor's Name	Last 4 digits of account number	\$	_ \$	. \$
900 EBrood 8+	When was the debt incurred?			
15 15	As of the date you file, the claim is: Check all that apply	<b>'</b> .		
City State ZIP Code	☐ Contingent ☐ Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Tune of DRIODITY upgequeed elaims			
Debtor 2 only	Type of PRIORITY unsecured claim:  Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	☐ Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated			
Is the claim subject to offset? ☐ No ☐ Yes	Other. Specify Light bill			

Case 17-31424-KRH Doc 16 Filed 03/27/17 Entered 03/27/17 12:35:05 Document Page 19 of 62 Ivonne Baners Case number (if know Part 1: Your PRIORITY Unsecured Claims — Continuation Page Total claim After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Last 4 digits of account number \_\_\_\_ 65 Granite Hill CIV When was the debt incurred? As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ☐ Domestic support obligations Debtor 1 and Debtor 2 only ☐ Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were ☐ Check if this claim is for a community debt Other Specify Old Apportment Is the claim subject to offset? ☐ No ☐ Yes Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent ☐ Unliquidated ☐ Disputed Who incurred the debt? Check one Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only ☐ Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other, Specify L Is the claim subject to offset? ☐ No renier Bank Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent ☐ Unliquidated ☐ Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only ■ Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other, Specify

☐ No ☐ Yes

Is the claim subject to offset?

		7/17 Entered 03/27/17 12:35:05 De: Page 20 of 62	sc Main
Debto	Document  Aikhi Yuvanne Barrera	Case number (# known)	
Par	t 2: List All of Your NONPRIORITY Unsecured Claims		
	Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the  Yes		
n it	ist all of your nonpriority unsecured claims in the alphabetical on nonpriority unsecured claim, list the creditor separately for each claim, included in Part 1. If more than one creditor holds a particular claim, list claims fill out the Continuation Page of Part 2.	For each claim listed, identify what type of claim it is. Do not	list claims already
	T1. 1 1		Total claim
4.1	Nonpriority Childitor's Name	Last 4 digits of account number	\$
•	9950 May Land Br	When was the debt incurred?	
ć	Richmond VA 23233  City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
\$		☐ Contingent	
•	Who incurred the debt? Check one.  Debtor 1 only	☐ Unliquidated ☐ Disputed	
	Debtor 2 only	U Disputed	
•	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	<ul> <li>☐ Student loans</li> <li>☐ Obligations arising out of a separation agreement or divorce</li> </ul>	
•	Check if this claim is for a community debt	that you did not report as priority claims	
•	Is the claim subject to offset? ☐ No	Debts to pension or profit-sharing plans, and other similar debts  Other. Specify 1021 road CQ	
:	☐ Yes		
4.2	Credit one Pank	Last 4 digits of account number	\$
	Nonpriority Creditor's Name  12.0 Parx 98823	When was the debt incurred?	
	number Street	As of the date you file, the claim is: Check all that apply.	
,	City State ZIP Code	Contingent	
3	Who incurred the debt? Check one.	Unliquidated	
1	Debtor 1 only	☐ Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Creek + Carro	
	☐ No ☐ Yes		
4.3	Charaban Hasatal	Last 4 digits of account number	
· · · · ·	Nonpriority Creditor's Name	When was the debt incurred?	\$
	Promiser Street	<del></del>	
	Richmond Wa 23225 State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated ☐ Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only	·	
	At least one of the debtors and another	Type of NONPRIORITY unsecufed claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
	is the claim subject to offset?	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	□ No □ Yes	Other. Specify DSpite Coll	
	□ Tes	· · · · · ·	
	·		

Document Page 21 of 62 Ywanne BArreno Case number (if known) Debtor 1 Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent ☐ Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify No. ☐ Yes Last 4 digits of account number \_\_\_ \_\_ \_\_ When was the debt incurred? As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? 🔲 No ☐ Yes Last 4 digits of account number \_\_\_ \_ When was the debt incurred? As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans ☐ At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? red + CAVA Other, Specify\_( ☐ No ☐ Yes

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Debtor 1

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Orkh Yurome Page 22 of 62

Case n

Case number (if known)\_

Part-3: List Others to Be Notified About a Debt That You Already Listed

	On which entry in Part 1 or Part 2 did you list the original creditor?
ame	On which that y in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
umber Street	Part 2: Creditors with Nonpriority Unsecured Claim
	Last 4 digits of account number
ty State ZIP Code	
ame	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
mber Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
by State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
me	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
mber Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
v State ZIP Code	Last 4 digits of account number
State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
me	
mber Street	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
mber Street	Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
y State ZIP Code	
me	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
mber Street	Part 2: Creditors with Nonpriority Unsecured
	Claims 
y State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
ne	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
mber Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
ty State ZIP Code	Last 4 digits of account number
June 21 Cook	On which entry in Part 1 or Part 2 did you list the original creditor?
me	
umber Street	of (Check one):  Part 1: Creditors with Priority Unsecured Claims
	Part 2: Creditors with Nonpriority Unsecured Claims

Case	e 17-31424-KRH Doc 16 Filed 03/27/1 Document F			
Debtor 1	Ainhi Vovone Barrero Midde Name Last Name	ay	Case number (if known)	_
Part 4:	Add the Amounts for Each Type of Unsecured Claim			
6. Total the Add the	e amounts of certain types of unsecured claims. This information amounts for each type of unsecured claim.	ation	is for statistical reporting purposes only. 28 U.S.C. § 159.	8 8
			Total claim	e >
Total claim	6a. Domestic support obligations	6a.	\$	
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	:
	6c. Claims for death or personal injury while you were intoxicated	6с.	\$	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$	
	6e. <b>Total.</b> Add lines 6a through 6d.	6e.	<b>\$</b>	
			Total claim	:
Total claim		6f.	\$	
from Part 2	<sup>2</sup> 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	-
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	
	<ol> <li>Other. Add all other nonpriority unsecured claims.</li> <li>Write that amount here.</li> </ol>	<b>6</b> i.	+ \$	
	6j, Total. Add lines 6f through 6i.	6j.	\$	Salvore and section as success some

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	in this i	nformation to i	dentify your c	ase:			
De	btor	First Name	YUVON	le Name	Last Name	<del></del> [	
	btor 2 ouse if filing	First Name	Midd	le Name	Last Name	<del></del>	
Un	ited States	Bankruptcy Court	for the: Eastern	District of Virgin	ia		
	se number known)				_		Check if this is an
L		···	···	· · · · · · · · · · · · · · · · · · ·			amended filing
~	'C' - ! - 1   1	T 100					
_		Form 106	<del></del>				
50	hed	ule G: E	xecuto	ry Cont	racts and	Unexpired Leases	12/15
info	rmation.	lf more space i	s needed, cop		page, fill it out, no	ogether, both are equally responsible for sup umber the entries, and attach it to this page.	
1.	Mo. €	Check this box a	nd file this form		ith your other sche	dules. You have nothing else to report on this fo	
	☐ Yes.	Fill in all of the i	nformation bek	ow even if the cor	ntracts or leases are	e listed on <i>Schedule A/B: Property</i> (Official Fort	m 106A/B).
2.		, rent, vehicie l				ract or lease. Then state what each contract in in the instruction booklet for more examples of	
	Person e	or company wit	th whom you l	nave the contrac	t or lease	State what the contract or lease is	for
2.1							
ş ,	Name					_	
	Number	Street	<del></del>			_	
	City		State	ZIP Code		-	
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;	Name	· <del></del> -	<del></del>			_	
	Number	Street				_	
	City		State	ZIP Code		_	
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	Name			<u> </u>		-	
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2.4	e van Stephendeller een velenge, aan gevan wa	mand of the control o	yott geregge den € 6. ** • • • de augên	wydor britis Cago — agylwyd, addynddio 1974 i banning yn	mude Addi JONGO でのわかかのう L. ノー・ディープイギー・	4. К. А. А. А. А. А. Б. Б. Б. С. Б.	and the second
,	Name					_	
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	City	<u> </u>	State	ZIP Code			
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	Name	·····	<del></del>	<u> </u>		-	
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	City		State	ZIP Code		-	

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Debtor	· 1	Pirst Name	Ywonne	Banere	Case number (#known)
		. 801 (40)110	HACING HOUNG	raet idailiù	
		Additional	Page if You Ha	ive More Contracts o	or Leases
F	Person	or company	with whom you	have the contract or leas	se What the contract or lease is for
2 <u>2</u>					
	Name				
	Number	Street			
		30660			
(	City	Programme to the second to	State	ZIP Code	System controls of a theorem and the following of the state of the s
2					
Ī	Name				
Ī	Number	Street			
7	City	·	State	ZIP Code	·
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	Name				
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1	Number	Street			
	City	·	State	ZIP Code	<del></del>
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ī	Number	Street			
7	nin.		Ciri	7ID Code	
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2					
	Name				
Ĭ	Number	Street	<u> </u>		<del></del>
7	City		State	ZIP Code	<del></del>
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Fill in this information to identify your case:	
Debtor 1 DINK's KNOWNE BARRETS	
First Name Middle Name Last Name	
Debtor 2 (Spouse, if filing) First Name Middle Name Lest Name	
United States Bankruptcy Court for the: Eastern District of Virginia	
Case number(If known)	☐ Check if this is an
	amended filing
Official Form 106H	
Schedule H: Your Codebtors	12/15
Codebtors are people or entities who are also liable for any debts you may have. Be a are filing together, both are equally responsible for supplying correct information. If n and number the entries in the boxes on the left. Attach the Additional Page to this page case number (if known). Answer every question.	nore space is needed, copy the Additional Page, fill it out,
Do you have any codebtors? (If you are filing a joint case, do not list either spouse as	a codebtor.)
À No	
Yes	
<ol> <li>Within the last 8 years, have you lived in a community property state or territory?</li> <li>Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Wash</li> </ol>	• • • •
No. Go to line 3.	1
Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?	
□ No	:
Yes. In which community state or territory did you live?	Fill in the name and current address of that person.
	,
Name of your spouse, former spouse, or legal equivalent	
Number Street	
City State ZIP Code	
3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor shown in line 2 again as a codebtor only if that person is a guarantor or cosigner Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule Schedule E/F, or Schedule G to fill out Column 2.	. Make sure you have listed the creditor on
Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
· 	Check all schedules that apply:
3.1	Schedule D, line
Name	☐ Schedule E/F, line
Number Street	☐ Schedule G, line
City State ZIP Code	
3.2	Schedule D, line
Name	Schedule E/F, line
Number Street	☐ Schedule G, line
City State ZIP Code	<del></del>
3.3	The second state of the second state of the second
Name	Schedule D, line
	Schedule E/F, line
Number Street	☐ Schedule G, line
City State ZIP Code	

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Debtor 1

Oikki	Yovonne	Barrera
First Name	Middle Name	Last Name

Case number (if known)	_	

Column 1: Your codebtor		Column 2: The creditor to whom you owe the del
		Check all schedules that apply:
Name		Schedule D, line
Ngui re		☐ Schedule E/F, line
Number Street		Schedule G, line
City State	ZIP Code	/ • Assess A conference for a • • • • Asses
		Schedule D, line
Name		☐ Schedule E/F, line
Number Street		Schedule G, line
City State	ZJP Code	
		Schedule D, line
Name		Schedule E/F, line
Number Street		Schedule G, line
City	ZIP Code	
		Schedule D, line
Name		☐ Schedule E/F, line
Number Street		Schedule G, line
City State	ZIP Code	
		Schedule D, line
Name		Schedule E/F, line
N. cohor	······	Schedule G, line
Number Street		
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Name		☐ Schedule E/F, line
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		Schedule D, line
Name		☐ Schedule E/F, line
Number Street		☐ Schedule G, line
City State	ZIP Code	· W 5// 5/ 70 ·
		Schedule D, line
Name		☐ Schedule E/F, line
Number Street	<del></del>	Schedule G, line

Fill in this information to identify	your case:	. ***			
Debtor 1 Debtor 1	Middle Name	Last Name			
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:	Eastern District of Virginia				
Case number			Ì	Check if this	s is:
(If known)				An amer	•
					ement showing postpetition chapter 13 as of the following date:
Official Form 1061				MM / DD	/ YYYY
Schedule I: You	ır Income				12/15
supplying correct information, if yo	ou are married and not fi ise is not filing with you, top of any additional pa	iling jointly, and yo , do not include inf	ur spouse is ormation ab	ilving with you out your spous	both are equally responsible for u, include information about your spouse. If more space is needed, attach a own). Answer every question.
Fill in your employment information.		Debtor 1			Debtor 2 or non-filing spouse
If you have more than one job,					
attach a separate page with information about additional employers.	Employment status	Employed  Not employed	ed		☐ Employed ☐ Not employed
Include part-time, seasonal, or		<b>a</b>			
self-employed work.  Occupation may include student or homemaker, if it applies.	Occupation	Call-	Cenk	<i>Y</i>	
or nonconduct, it is applied.	Employer's name	The Be	08VH5	Compo	onles
	Employer's address	Number Street	Aeux D'hi	us_	Number Street
		Dec 140	Ch 20 ]-	70 11	
•		1/01411	CIUSHE Caraca é	EDEC	
1		City	State ZIP	Code	City State ZIP Code
	How long employed the	ere? 341S	}		
Part 2: Give Details About	Monthly Income				
Estimate monthly income as of spouse unless you are separated		m. If you have nothi	ing to report f	or any line, write	e \$0 in the space. Include your non-filing
If you or your non-filing spouse ha below. If you need more space, a	ave more than one employ ttach a separate sheet to t	er, combine the info this form.	ormation for a	ll employers for	that person on the lines
			Fo	r Debtor 1	For Debtor 2 or non-filing spouse
<ol><li>List monthly gross wages, sal deductions). If not paid monthly,</li></ol>			2. \$	890.00	\$
3. Estimate and list monthly over	rtime pay.		3. +\$ <u></u>	172	+ \$
4. Calculate gross income. Add li	ne 2 + line 3.		4. \$ =	162	\$

Debtor 1 Pink Name Niddle Name Last Name		Case number (if known)		· · · · · · · · · · · · · · · · · · ·
		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	4.	\$ <u>2162</u> ,00	\$	
5. List all payroll deductions:		_		
5a. Tax, Medicare, and Social Security deductions	5a.	\$200,00	\$	
5b. Mandatory contributions for retirement plans	5b.	\$	\$	
5c. Voluntary contributions for retirement plans	5c.	\$	\$	
5d. Required repayments of retirement fund loans	5d.	\$	\$	
5e. Insurance	5e.	\$21.60	\$	
5f. Domestic support obligations	5f.	\$	\$	
5g. Union dues	5g.	\$	\$	
5h. Other deductions. Specify:	5h.	+\$	+ s	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$221,60	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 1940.40	\$	
8. List all other income regularly received:				
<ol> <li>Net income from rental property and from operating a business, profession, or farm</li> </ol>				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	<u>s Ø</u>	\$	
8b. Interest and dividends	8b.	\$	\$	
8c. Family support payments that you, a non-filing spouse, or a depender regularly receive	nt	,		
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$/67.00	\$	
8d. Unemployment compensation	8d.	\$	\$	
8e. Social Security	8e.	\$	\$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: 400 Stamps		\$ <u>300</u> .00	\$	
8g. Pension or retirement income	8g.	s 7	\$	
8h. Other monthly income. Specify:	8h.	+: 2	+ ¢	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h,	9.	\$4(070	\$	
10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	s 1940 +	\$447.00 =	\$2407.°
<ol> <li>State all other regular contributions to the expenses that you list in Sched Include contributions from an unmarried partner, members of your household, you friends or relatives.</li> </ol>			nates, and other	
Do not include any amounts already included in lines 2-10 or amounts that are r	not av	ailable to pay expense	s listed in Schedule J.	_
Specify:			11. +	· \$ <b>3</b>
12. Add the amount in the last column of line 10 to the amount in line 11. The r Write that amount on the Summary of Your Assets and Liabilities and Certain St	resuit		ly income.	\$2407. <sup>3</sup> Combined monthly income
13. Do you expect an increase or decrease within the year after you file this fo	orm?			
Yes. Explain:				

Fill in this information to identify your case:			
Debtor 1 Nikki Vivonne Barnera			
First Name Last Name Last Name	Check if this is:		
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	An amended	-	
United States Bankruptcy Court for the: Eastern District of Virginia		: snowing post of the following	petition chapter 13 date:
Case number	MM / DD / YYY	<u> </u>	
(if known)			
Official Form 106J			
Schedule J: Your Expenses			12/15
Be as complete and accurate as possible. If two married people are fil information. If more space is needed, attach another sheet to this form (if known). Answer every question.			
Part 1: Describe Your Household			
1. Is this a joint case?	···· ··· ··· ···		
No. Go to line 2. Yes. Does Debtor 2 live in a separate household?			
<ul><li>□ No</li><li>□ Yes. Debtor 2 must file Official Form 106J-2, Expenses for S</li></ul>	Separate Household of Debtor 2.		
2. Do you have dependents?	Dependent's relationship to	Dependent's	Does dependent live
Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	age	with you?
Do not state the dependents'	OSCACTLED	9	□ No
names.	SON	2	☐ Yes
	I sarak I Vasquer		D ves
			□ No
		<del>-</del>	☐ Yes
			U No □ Yes
			□ No
			Yes
3. Do your expenses include	,		
expenses of people other than yourself and your dependents?			
Automorphism in the V V V		**************************************	
Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless your	are using this form as a sunniement in	a Chanter 13 c	ase to report
expenses as of a date after the bankruptcy is filed. If this is a supplem applicable date.			
Include expenses paid for with non-cash government assistance if you	u know the value of		
such assistance and have included it on Schedule I: Your Income (Off	·	Your expe	1508
<ol> <li>The rental or home ownership expenses for your residence. Include any rent for the ground or lot.</li> </ol>	e first mortgage payments and 4.	<u>ේ රිට් </u>	7.00
If not included in line 4:		, po	
4a. Real estate taxes	<b>4a</b> .	\$ <u>0</u> 2	70
4b. Property, homeowner's, or renter's insurance	4b.	\$ <u>₩</u> ∑,	<del></del>
4c. Home maintenance, repair, and upkeep expenses	<b>4c</b> .	\$ 4	····
4d. Homeowner's association or condominium dues	4d.	s C	

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Debtor 1 Dikk, Vurone Barriero Case number (d known)\_\_\_\_\_

Case number (if known)\_\_\_\_\_\_

			Your expenses
5	Additional mortgage payments for your residence, such as home equity loans	5.	\$_ <i>Ø</i>
٥.	Additional mortgage payments for your residence, such as notic equity loans	<b>J</b> .	
6.	Utilities:		125 00
	6a. Electricity, heat, natural gas	6a.	: 170 80
	6b. Water, sewer, garbage collection	6b.	180 00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$
	6d. Other. Specify:	6d.	11000
7	Food and housekeeping supplies	7.	\$ 400.
8.	Childcare and children's education costs	8.	\$ 300.
۹.	Clothing, laundry, and dry cleaning	9.	\$ 2000
10	Personal care products and services	10.	\$ 300
11.	Medical and dental expenses	11.	\$
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$200.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14,	Charitable contributions and religious donations	14.	\$
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.		104
	15a. Life insurance	15a.	\$ 1,9-
	15b. Health insurance	15b.	s tomb
	15c. Vehicle insurance	15c.	s 130 00
	15d. Other insurance. Specify:	15d.	\$
16,	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$_ <b>Ø</b>
17.	Installment or lease payments:		21200
	17a. Car payments for Vehicle 1	17a.	s <u>360.</u>
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17 <b>d</b> .	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$ <u>&amp;</u>
19,	Other payments you make to support others who do not live with you.  Specify:	19.	s_Ø
20	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom-	<b>2</b> .	•
20.		20a.	s Ø
	20a. Mortgages on other property	206.	s 70
	20b. Real estate taxes	206. 20c.	s 8
	20c. Property, homeowner's, or renter's insurance	200. 20d.	· 8
	20d. Maintenance, repair, and upkeep expenses  20e. Homeowner's association or condominium dues	200. 20e.	\$ 8
	ZUE, FIGHEOWHELS ASSOCIATION OF CONCOMMINION DUES	200.	· <del>-   -   -   -   -   -   -   -   -   - </del>

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Debtor 1 Airki, Vuronne Bamero	Case number (if known)	<u> </u>
21. Other. Specify:	21.	+\$ <u></u>
22. Calculate your monthly expenses.		**************************************
22a. Add lines 4 through 21.	22a.	\$2689.94
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official For	m 106J-2 22b.	s Ø
22c. Add line 22a and 22b. The result is your monthly expenses.	<b>22</b> c.	<u>\$2689.94</u>
23. Calculate your monthly net income.		2407 on
23a. Copy line 12 (your combined monthly income) from Schedule I.	<b>23a</b> .	\$240+. -\$2689,94
23b. Copy your monthly expenses from line 22c above.	23b.	-\$2689.44
23c. Subtract your monthly expenses from your monthly income.  The result is your <i>monthly net income</i> .	23c.	-,28294
24. Do you expect an increase or decrease in your expenses within the yea	ar after you file this form?	
For example, do you expect to finish paying for your car loan within the year mortgage payment to increase or decrease because of a modification to the		
<b>□</b> No.		- man v / and
Yes. Explain here: When Over-time cor	ne available	at

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	Debtor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the: Case number (If known)  Official Form 106J-2	Middle Name Lest Name  Middle Name Lest Name  Eastern District of Virginia	expense	nded fil ement s s as of	showing post the following	
Us De or ne qu	se this form for Debtor 2's separa ebtor 2 have one or more depend nly with respect to expenses for i	expenses for Sepa  ate household expenses ONLY IF De  dents in common, list the dependent  Debtor 2 that are not reported on Sc is form. On the top of any additional  asehold	obtor 1 and Debtor 2 maintain se s on both Schedule J and this fo hedule J. Be as complete and a	parate orm. A ccurate	households. nswer the que as possible.	if Debtor 1 and estions on this form If more space is
1.	Do you and Debtor 1 maintain se	eparate households?				
	No. Do not complete this for Yes	rm.				
2.	Do you have dependents?	□ No	Dependent's relationship to		Dependent's	Does dependent live
	Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J.  Do not state the dependents names.	Yes. Fill out this information for each dependent	Debtor 2:		age	with you?  No Yes No Yes No Yes No Yes No Yes No Yes
3.	Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?	☐ No ☐ Yes				A
Pa	rt 2: Estimate Your Ongoi	ing Monthly Expenses				
ex In	spenses as of a date after the bar clude expenses paid for with nor	n-cash government assistance if you	ı know the value of	ent in a		
		d it on Schedule i: Your Income (Offi	ŕ		Your expe	11353
4.	any rent for the ground or lot.	expenses for your residence. Include	mes mongage payments and	4.	\$	
	If not included in line 4:					
	4a. Real estate taxes			4a.	\$	
	4b. Property, homeowner's, or r	enter's insurance		4b.	\$	
	4c. Home maintenance, repair,	and upkeep expenses		4c.	\$	
	4d. Homeowner's association of	r condominium dues		4d.	\$	

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Debtor 1 Dikki Yurone Banera
First Name Middle Nama Last Name

Case number (if known)

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$
	6b. Water, sewer, garbage collection	6b.	<b>\$</b>
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$
	6d. Other, Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	\$
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c,	\$
	15d. Other insurance. Specify:	15d,	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c,	\$
	17d. Other. Specify:	17 <b>d</b> .	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18,	\$
19.	Other payments you make to support others who do not live with you.	19.	\$
	Specify:		Ψ
20.			<b></b>
	20a. Mortgages on other property	20a,	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

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Debt	or 1 Nikk, Varonne Barneron Case num	nber (if known)			
21. (	Other. Specify:	<b>2</b> 1.	+\$		
•	<b>four monthly expenses.</b> Add lines 5 through 21.  The result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to calculotal expenses for Debtor 1 and Debtor 2.	alate the 22.	\$		
23. L	ine not used on this form.				
24. C	o you expect an increase or decrease in your expenses within the year after you file this fo	orm?			
	or example, do you expect to finish paying for your car loan within the year or do you expect your nortgage payment to increase or decrease because of a modification to the terms of your mortgag				
	No.  Yes. Explain here:			* W	 9
	, , , , , , , , , , , , , , , , , , ,				

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n this information to identify your case:		
Duble 16,00000	Baner	
or 1 First Name Middle Name	Last Name	
or 2 se, if filing) First Name Middle Name	Last Name	
d States Bankruptcy Court for the: Eastern District of	f Virginia	
number		
own)		☐ Check if this
		amended filii
fficial Form 106Dec		
eclaration About an	Individual Debtor's Schedules	12/
wo married people are filing together, both are	e equally responsible for supplying correct information.	
	uptcy schedules or amended schedules. Making a false statement, conce tion with a bankruptcy case can result in fines up to \$250,000, or imprise 3571.	
ars, or both. 18 U.S.C. §§ 152, 1341, 1519, and	tion with a bankruptcy case can result in fines up to \$250,000, or imprise	
Sign Below  Did you pay or agree to pay someone who is	tion with a bankruptcy case can result in fines up to \$250,000, or imprise 3571.	onment for up to 2
Sign Below  Did you pay or agree to pay someone who is	tion with a bankruptcy case can result in fines up to \$250,000, or imprise 3571.  NOT an attorney to help you fill out bankruptcy forms?	onment for up to 2
Sign Below  Did you pay or agree to pay someone who is	tion with a bankruptcy case can result in fines up to \$250,000, or imprise 3571.  NOT an attorney to help you fill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice, Decl.	onment for up to 2
Sign Below  Did you pay or agree to pay someone who is	tion with a bankruptcy case can result in fines up to \$250,000, or imprise 3571.  NOT an attorney to help you fill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice, Decl.	onment for up to 2
Sign Below  Did you pay or agree to pay someone who is  Yes. Name of person	tion with a bankruptcy case can result in fines up to \$250,000, or imprise 3571.  NOT an attorney to help you fill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice, Decl.	onment for up to 2
Sign Below  Did you pay or agree to pay someone who is  Yes. Name of person	NOT an attorney to help you fill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice, Deck.  Signature (Official Form 119).	onment for up to 2
Sign Below  Did you pay or agree to pay someone who is  No  Yes. Name of person  Under penalty of perjury, I declare that I have	NOT an attorney to help you fill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice, Deck.  Signature (Official Form 119).	onment for up to 20
Sign Below  Did you pay or agree to pay someone who is  Yes. Name of person  Under penalty of perjury, I declare that I have	NOT an attorney to help you fill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice, Deck.  Signature (Official Form 119).	onment for up to 2
Sign Below  Did you pay or agree to pay someone who is  Yes. Name of person  Under penalty of perjury, I declare that I have	stion with a bankruptcy case can result in fines up to \$250,000, or imprise 3571.  NOT an attorney to help you fill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice, Deck.  Signature (Official Form 119).  Preparer's Notice and Signature (Official Form 119).	onment for up to 20
Sign Below  Did you pay or agree to pay someone who is Yes. Name of person  Under penalty of perjury, I declare that I have	tion with a bankruptcy case can result in fines up to \$250,000, or imprise 3571.  NOT an attorney to help you fill out bankruptcy forms?	onment for up to 2

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Debtor 1  Debtor 2 (Spouse, if filing)  First Name  Debtor 2  Middle Name  Middle Name	BAnce a Last Name			
United States Bankruptcy Court for the: Eastern District of Vil Case number (If known)	rginia			Check if this is an amended filing
Official Form 107 Statement of Financial Affair	s for Indivi	duals Filing fo	or Bankruptcy	7 12/15
Be as complete and accurate as possible. If two marrie information. If more space is needed, attach a separat number (if known). Answer every question.  Part 1: Give Details About Your Marital State  1. What is your current marital status?	e sheet to this form	. On the top of any addition		
<ul> <li>Not married</li> <li>2. During the last 3 years, have you lived anywhere of No</li> <li>☐ Yes. List all of the places you lived in the last 3 years.</li> <li>☐ Debtor 1;</li> </ul>	ears. Do not include v			Dates Debtor 2 lived there
ALOSA B. Granite  Number Street  h.U. Cir  Bichmond VA 2322  City State ZIP Code	From <i>OLa <b>(1844</b></i> To <i>10   14</i>	Same as Debtor 1  Number Street  City	State ZIP Code	Same as Debtor 1  From To
LeOD7 Glen way Ct Number Street Bichmond VA 23225	From 09/15 To 0/e/110	Same as Debtor 1  Number Street		Same as Debtor 1  From To
City State ZIP Code  3. Within the last 8 years, dld you ever live with a sp states and territories include Arizona, California, Idah No Yes. Make sure you fill out Schedule H: Your Cod	o, Louisiana, Nevada	a, New Mexico, Puerto Rico		

Part 2: Explain the Sources of Your Income

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Did you have any income from employment Fill in the total amount of income you receive If you are filing a joint case and you have inc	d from all jobs and all bus	inesses, including part-tir	me activities.	endar years?
No	omo mar you receive toge	anor, nor it oriny orion arias		
Yes. Fill in the details.				
	Calad A Calada		Ophical 25 1 3 To 1911	
	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of Income Check all that apply.	Gross Income (before deductions ar exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips  Operating a business	\$1890.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
For last calendar year: (January 1 to December 312010	Wages, commissions, bonuses, tips  Operating a business	\$1890.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$
For the calendar year before that: (January 1 to December 31	Wages, commissions, bonuses, tips  Operating a business	\$ 1890,00	Wages, commissions, bonuses, tips  Operating a business	\$
Did you receive any other income during t Include income regardless of whether that incunemployment, and other public benefit paying gambling and lottery winnings. If you are filling	come is taxable. Examples nents; pensions; rental inc	of other income are alinome; interest; dividends;	money collected from laws	suits; royalties; and
Include income regardless of whether that incunemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from No	come is taxable. Examples nents; pensions; rental inc g a joint case and you hav	of other income are alinome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	suits; royalties; and
unemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from the	come is taxable. Examples nents; pensions; rental inc g a joint case and you hav	of other income are alinome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	suits; royalties; and
Include income regardless of whether that incunemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from No	come is taxable. Examples nents; pensions; rental inc g a joint case and you hav each source separately. D	of other income are alinome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	suits; royalties; and a under Debtor 1.  Gross Income from each source
Include income regardless of whether that incunemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from No Yes. Fill in the details.	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. Debter 1  Sources of income Describe below.	Gross Income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once t you listed in line 4.  Sources of Income Describe below.	Gross Income from each source (before deductions an exclusions)
Include income regardless of whether that incunemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from No Yes. Fill in the details.	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. Debter 1  Sources of income Describe below.	Gross Income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once t you listed in line 4.  Sources of Income Describe below.	Gross income from each source (before deductions are exclusions)
Include income regardless of whether that incunemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from No Yes. Fill in the details.	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. Debter 1  Sources of income Describe below.	Gross income from each source (before deductions and exclusions)  \$	money collected from laws ed together, list it only once t you listed in line 4.  Sources of Income Describe below.	Gross Income from each source (before deductions at exclusions)
Include income regardless of whether that incunemployment, and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from the No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. Debter 1  Sources of income Describe below.	Gross Income from each source (before deductions and exclusions)  \$	money collected from laws ed together, list it only once t you listed in line 4.  Sources of Income Describe below.	Gross Income from each source (before deductions at exclusions)
Include income regardless of whether that incunemployment, and other public benefit paying ambling and lottery winnings. If you are filing List each source and the gross income from the No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:  (January 1 to December 31,	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. Debter 1  Sources of income Describe below.	Gross Income from each source (before deductions and exclusions)  \$	money collected from laws ed together, list it only once t you listed in line 4.  Sources of Income Describe below.	Gross Income from each source (before deductions at exclusions)

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Debtor 1	<u> </u>	Yuronn Middle Name	e BA	mera	Case	number (if known)	
Part 3:	List Certai	n Payments	You Made B	efore You Filed	for Bankruptcy		
6. Are ei	ther Debtor 1's	or Debtor 2's	debts primar	ily consumer debt	s?		
_	o. <b>Neither Det</b>	tor 1 nor Debt	or 2 has prim	- arily consumer de		re defined in 11 U.S.C. § 10	1(8) as
	During the 9	0 days before y	ou filed for bar	nkruptcy, did you pa	ay any creditor a total o	f \$6,225* or more?	
	No. Go t	o line 7.					
	tota	i amount you pa	aid that credito	or. Do not include p		or more payments and the upport obligations, such as this bankruptcy case.	
	* Subject to	adjustment on 4	/01/16 and ev	ery 3 years after th	at for cases filed on or a	after the date of adjustment.	
☐ Ye	es. Debtor 1 or	Debtor 2 or bo	th have prima	arily consumer de	bts.		
					ay any creditor a total of	f \$600 or more?	
	No. Go t	o line 7.					
	сген	ditor. Do not inc	lude payments	s for domestic supp	\$600 or more and the to ort obligations, such as ey for this bankruptcy ca	otal amount you paid that child support and ssee.	
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
					\$	\$_	☐ Mortgage
	Creditor's	Name			- "		Car
	Number	Street					Credit card
	MOULTAIN	Onger					Loan repayment
			······································				Suppliers or vendors

City

City

City

Creditor's Name

Number Street

Creditor's Name

Number Street

State

State

State

ZIP Code

ZIP Code

ZIP Code

Other\_

☐ Mortgage

Loan repayment Suppliers or vendors

Car Credit card

Other\_

☐ Mortgage

Other \_\_\_

Loan repayment ☐ Suppliers or vendors

🔲 Car Credit card Case 17-31424-KRH Doc 16 Filed 03/27/17 Entered 03/27/17 12:35:05 Desc Main Document Page 40 of 62

Insider's Name  Number Street		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
			\$	\$	
				· ~	
Number Street					
<del></del>					
City	State ZIP Code	u.			
		_	\$	\$	
Insider's Name					
Number Street				,	
		• ———			
City	State ZIP Code	•			
an insider? Include payments on debts  No Yes. List all payments the		y an insider.  Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name		•	\$	<b>\$</b>	
Number Street				,	
		-			
	State ZIP Code	-			
City					Brown war and a second of the second
City			e	<b>e</b>	
City Insider's Name			\$	\$	

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Vithin 1 year before you filed for bankrup ist all such matters, including personal injuried contract disputes.	otcy, were you a party in any l	awsuit, court action, or admi		
Yes, Fill in the details.	Nature of the case	Court or agency		Status of the cas
Case title	_	Court Name		Pending On appeal
Case number	-	Number Street		Concluded
	_	City Sta	te ZIP Code	<del></del>
Case title	_	Court Name		Pending On appeal
Case number	-	Number Street		Concluded
No. Go to line 11. Yes. Fill in the information below.				
Tes. Fill in the information below.	Describe the prope	rty	Date	Value of the proper
Creditor's Name	Describe the prope	nty	Date	Value of the proper
	Describe the proper	~	Date	
Creditor's Name		repossessed. foreclosed.	Date	
Creditor's Name  Number Street	Explain what happe Property was Property was Property was	repossessed. foreclosed. garnished. attached, seized, or levied.	Date	
Creditor's Name  Number Street	Explain what happe Property was Property was Property was Property was Property was	repossessed. foreclosed. garnished. attached, seized, or levied.		\$
Creditor's Name  Number Street  City State ZIP	Explain what happe Property was Property was Property was Property was Property was	repossessed. foreclosed. garnished. attached, seized, or levied.		\$Value of the prope
Creditor's Name  Number Street  City State ZIP (	Explain what happe Property was Property was Property was Property was Describe the property	repossessed. foreclosed. garnished. attached, seized, or levied. rty		\$Value of the prop

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No -			
Yes. Fill in the details.			
	Describe the action the creditor took	Date action	Amount
Creditor's Name	<u>.</u>	was taken	
			\$
Number Street	-		<b>*</b>
	<del>.</del>		
City State ZIP Code	Last 4 digits of account number: XXXX		
	cy, was any of your property in the possession of an a		_
ditors, a court-appointed receiver, a cus		and gride for the control	
No			
Yes			
List Certain Gifts and Contribu	tions		
			· <u> </u>
hin 2 years before you filed for bankrup			
	tcv, did you give any gifts with a total value of more th	han \$600 per person?	
	tcy, did you give any gifts with a total value of more the	han \$600 per person?	
No	tcy, did you give any gifts with a total value of more th	han \$600 per person?	
No	tcy, did you give any gifts with a total value of more th	nan \$600 per person?	
No		nan \$600 per person?  Dates you gave	Value
No Yes. Fill in the details for each gift.	tcy, did you give any gifts with a total value of more the state of th		Value
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600		Dates you gave	Value
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person		Dates you gave	Value \$
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600		Dates you gave	Value \$
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person		Dates you gave	Value \$ \$
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person		Dates you gave	Value \$ \$
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift		Dates you gave	Value \$ \$
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift		Dates you gave	Value \$ \$
No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street		Dates you gave	Value \$ \$
Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street		Dates you gave	Value \$ \$
Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street		Dates you gave	<b>Value</b> \$ \$
Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you	Describe the gifts	Dates you gave	Value  \$
Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600	Describe the gifts	Dates you gave the gifts	\$ \$
Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600	Describe the gifts	Dates you gave the gifts	\$ \$
Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZiP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	\$ \$
Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZiP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	\$ \$ Value
Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZiP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	\$ \$ Value
Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZiP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	\$ \$ Value
Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street	Describe the gifts	Dates you gave the gifts	\$ \$ Value

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fithin 2 years before you filed for banki	ruptcy, did you give any gifts or contributions with a total valu	ue of more than \$6	00 to any charity?
1 No			
Yes. Fill in the details for each gift or co	ontribution.		
Gifts or contributions to charitles that total more than \$600	Describe what you contributed	Date you contributed	Value
			\$
Charity's Name		<del></del>	
	<del>_</del>		\$
Number Street			
City State ZIP Code	_		
16: List Certain Losses			
Vithin 1 year before you filed for bankrulisaster, or gambling?  No  Yes. Fill in the details.	uptcy or since you filed for bankruptcy, did you lose anything	because of theft, f	ire, other
No Yes. Fill in the details.  Describe the property you fost and	Describe any insurance coverage for the loss	because of theft, f	Value of property
No Yes. Fill in the details.		Date of your	
No Yes. Fill in the details.  Describe the property you fost and	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your	Value of property
No Yes. Fill in the details.  Describe the property you fost and	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your	Value of property
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Person Who Was Paid  Number Street  State ZIP Code  thin 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property insferred in the ordinary course of your business or financial affairs? Clude both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). No not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.  Description and value of property  Describe any property or payments received  Date transfer.		Description and value of any property tra	nsferred	Date payment or transfer was made	Amount of payment
Email or website address  Person Who Made the Peyment, if Not You  thin 1 year before you filled for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone with mised to help you deal with your creditors or to make payments to your creditors?  In the details.  Description and value of any property transferred  Date payment or transfer was made  Person Who Was Paid  Number Street  S  City State 2IP Code  City State 2IP Code  City State 2IP Code  City State 2IP Code  Description and value of otherwise transfer any property to anyone, other than property into include giths and transfers made as security (such as the granting of a security interest or mortgage on your property). No  Yes. Fill in the details.  Description and value of property  Description and value of prope	Person Who Was Paid		,		
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omised to help you deal with your creditors or to make payments to your creditors?  Into thickude any payment or transfer that you listed on line 16.    Description and value of any property transferred   Date payment or transfer was made	Person Who Made the Payment, if Not You				
Person Who Was Paid  Number Street  S  City State ZIP Code  thin 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property insferred in the ordinary course of your business or financial affairs?  Jude both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).  No  Yes. Fill in the details.  Description and value of property  Describe any property or payments received or debts paid in exchange  Person Who Received Transfer  Number Street  City State ZIP Code  Person's relationship to you  Person's relationship to you  Person Who Received Transfer	No Yes. Fill in the details.	Description and value of any property train	naferred	Date payment or	Amount of paym
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Person Who Received Transfer  City State ZIP Code  Person's relationship to you  Person Who Received Transfer		uptcy, did you sell, trade, or otherwise tra	ansfer any property to	anyone, other tha	n property
Number Street  City State ZIP Code  Person's relationship to you  Person Who Received Transfer	insferred in the ordinary course of you clude both outright transfers and transfers not include gifts and transfers that you h	or business or financial affairs? Is made as security (such as the granting of	a security interest or mo	ortgage on your pro	
City State ZIP Code  Person's relationship to you  Person Who Received Transfer	insferred in the ordinary course of you clude both outright transfers and transfers not include gifts and transfers that you h	ir business or financial affairs?  s made as security (such as the granting of a lave already listed on this statement.  Description and value of property	Describe any property o	r payments received	perty).
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kthin 10 years before you filed for bar re a beneficiary? (These are often calle		ty to a self-settled true	st or similar device of v	vhich you
Yes. Fill in the details.				
	Description and value of the prope	erty transferred		Date transfer
	, max , Ar xw	-	***************************************	was made
Name of trust				
	<del></del>		-	
8: List Certain Financial Accor	inte Instrumente Sefe Denocit	Royer and Stores	e linite	
ithin 1 year before you filed for bank				honefit
osed, sold, moved, or transferred?	,		,	
clude checking, savings, money mar			ares in banks, credit un	ilons,
okerage houses, pension funds, coo	peratives, associations, and other fi	nancial institutions.		
No				
Yes. Fill in the details.				
	Last 4 digits of account number	Type of account or	Date account was	Last balance befo
		instrument	closed, sold, moved, or transferred	closing or transfe
	<u> </u>			
Name of Financial Institution		☐ Checking		\$
Name of Financial Institution  Number Street	xxxx	Savings	<del></del>	\$
	xxxx	Savings  Money market	<del></del>	\$
		Savings		\$
Number Street		Savings Money market Brokerage	<u> </u>	\$
Number Street  City State ZIP Code		Savings Money market Brokerage		\$ \$
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Number Street  City State ZIP Code  Name of Financial Institution  Number Street  City State ZIP Code  o you now have, or did you have with  scyrities, cash, or other valuables?	xxxx	Savings  Money market  Brokerage  Other  Checking Savings Money market Brokerage  Other	box or other depositor	\$ \$y for
Number Street  City State ZiP Code  Name of Financial Institution  Number Street  City State ZiP Code  o you now have, or did you have with ocurities, cash, or other valuables?	xxxx	Savings  Money market  Brokerage  Other  Checking Savings Money market Brokerage  Other	box or other depositor	\$ \$y for
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Number Street  City State ZiP Code  Name of Financial Institution  Number Street  City State ZiP Code  o you now have, or did you have with ocurities, cash, or other valuables?	in 1 year before you filed for bankru	Savings  Money market  Brokerage  Other  Checking Savings Money market Brokerage Other	ne contents	Do you sti
Number Street  City State ZIP Code  Name of Financial Institution  Number Street  City State ZIP Code  O you now have, or did you have with  ocurrities, cash, or other valuables?  No  Yes. Fill in the details.	in 1 year before you filed for bankru	Savings  Money market  Brokerage  Other  Checking Savings Money market Brokerage Other	ne contents	Do you sti have it?
Number Street  City State ZiP Code  Name of Financial Institution  Number Street  City State ZiP Code  o you now have, or did you have with ocurities, cash, or other valuables?	in 1 year before you filed for bankru	Savings  Money market  Brokerage  Other  Checking Savings Money market Brokerage Other	ne contents	Do you sti
Number Street  City State ZIP Code  Name of Financial Institution  Number Street  City State ZIP Code  O you now have, or did you have with  ocurrities, cash, or other valuables?  No  Yes. Fill in the details.	in 1 year before you filed for bankru	Savings  Money market  Brokerage  Other  Checking Savings Money market Brokerage Other	ne contents	Do you sti have it?

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Have you stored property in a s  No  Yes. Fill in the details.	storage unit or place other than your home v	within 1 year before you filed for bankrupt	су?
Tes. Fill III the details.	Who else has or had access to it	? Describe the contents	Do you sti
Name of Storage Facility	Name		□ No □ Yes
Number Street	Number Street		
	City State ZIP Code	<del></del>	
City State  Identify Property	ZIP Code  You Hold or Control for Someone Else		V
	operty that someone else owns? Include an		for,
Yes. Fill in the details.	Where is the property?	Describe the property	Value :
Owner's Name			<b>\$</b>
Number Street	Number Street	<del></del>	\$ 4 1 1
City State	ZIP Code State	ZIP Code	
	ut Environmental Information	••	ત નાનાકર્જી
r the purpose of Part 10, the fo		concerning poliution contamination rela	
hazardous or toxic substance including statutes or regulation. Site means any location, facility utilize it or used to own, open thazardous material means an substance, hazardous material	y federal, state, or local statute or regulation is, wastes, or material into the air, land, soil, ons controlling the cleanup of these substantity, or property as defined under any environate, or utilize it, including disposal sites. By thing an environmental law defines as a hall, pollutant, contaminant, or similar term.  proceedings that you know about, regardles	, surface water, groundwater, or other med nces, wastes, or material. nmental law, whether you now own, opera azardous waste, hazardous substance, tox	tlium, te, or
Environmental law means any hazardous or toxic substance including statutes or regulation site means any location, facility utilize it or used to own, operational means and substance, hazardous material port all notices, releases, and	es, wastes, or material into the air, land, soil, ons controlling the cleanup of these substantity, or property as defined under any environate, or utilize it, including disposal sites.  Bything an environmental law defines as a hall, poliutant, contaminant, or similar term.	, surface water, groundwater, or other medices, wastes, or material.  Immental law, whether you now own, operal  Exardous waste, hazardous substance, tox  Es of when they occurred.	dium, te, or
Environmental law means any hazardous or toxic substance including statutes or regulation.  Site means any location, facility utilize it or used to own, operational means an substance, hazardous material port all notices, releases, and has any governmental unit not not how to the substance of t	es, wastes, or material into the air, land, soil, ons controlling the cleanup of these substantity, or property as defined under any environate, or utilize it, including disposal sites.  Bything an environmental law defines as a hall, poliutant, contaminant, or similar term.  Proceedings that you know about, regardles	, surface water, groundwater, or other medices, wastes, or material.  Immental law, whether you now own, operal  Exardous waste, hazardous substance, tox  Es of when they occurred.	dium, te, or
Environmental law means any hazardous or toxic substance including statutes or regulation. Site means any location, facility utilize it or used to own, operational descriptions of the substance, hazardous material port all notices, releases, and thas any governmental unit not the law of the substance in the sub	is, wastes, or material into the air, land, soil, ons controlling the cleanup of these substantity, or property as defined under any enviror ate, or utilize it, including disposal sites. Bything an environmental law defines as a haal, pollutant, contaminant, or similar term.  proceedings that you know about, regardles at filed you that you may be liable or potential.	, surface water, groundwater, or other medices, wastes, or material.  nmental law, whether you now own, operates  ezardous waste, hazardous substance, tox  es of when they occurred.  Ify liable under or in violation of an enviror	tlium, te, or ric nmental law?

City

State ZIP Code

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ve you notified any	governmental unit			
No	-	-		
Yes. Fill in the deta	ails.			
		Governmental unit	Environmental law, if you know it	Date of notice
				) 
Name of site		Governmental unit	_	
Number Street		Number Street	<del></del>	ı
		City State ZIP Code	_	
City	State ZIP Code	_		
-				
ve you been a party	in any judicial or a	dministrative proceeding under an	ny environmental law? Include settleme	ents and orders.
ľ No				
Yes. Fill in the deta	ils.			
		Court or agency	Nature of the case	Status of th
Case title				<b></b>
		Court Name	<del></del>	Pending
				🖵 On appe
		_		<b>—</b> • • • • • • • • • • • • • • • • • • •
		Number Street		☐ Conclud
Case number		_	wie.	Conclud
Case number		Number Street  City State ZIP Co	ode .	☐ Conclud
11: Give Detail	you filed for bankr	City State ZIP Co	y Business have any of the following connections	
11: Give Detail ithin 4 years before A sole propriet A member of a A partner in a p An officer, direct	you filed for bankri or or self-employed limited liability con partnership ctor, or managing	usiness or Connections to Any uptcy, did you own a business or it d in a trade, profession, or other ac mpany (LLC) or limited liability part executive of a corporation	y Business have any of the following connections to ctivity, either full-time or part-time tnership (LLP)	
11: Give Detail ithin 4 years before y	you filed for bankri or or self-employed limited liability con eartnership ctor, or managing least 5% of the vot	city State ZIP Connections to Any uptcy, did you own a business or he d in a trade, profession, or other ac impany (LLC) or limited liability part executive of a corporation ting or equity securities of a corporation	y Business have any of the following connections to ctivity, either full-time or part-time tnership (LLP)	
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State ZIP Code  Date Issued  MM / DD / YYYY  State ZIP Code  S	(if known)
State ZIP Code  State ZIP Code  State ZIP Code  State ZIP Code  Date issued  MM / DD / YYYY  Street  State ZIP Code  Date ZIP Code  State ZIP Code  Date ZIP Code  Date ZIP Code  State ZIP Code  Date ZIP Code	Employer Identification number  Do not include Social Security number or ITIN
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ars before you filed for bankruptcy, did you give a financial statement to anyone ab a, creditors, or other parties.  If in the details below.  Date issued  MM / DD / YYYY  Street  State ZIP Code  State ZIP Code  details and any attachments, and I deare true and correct. I understand that making a false statement, concealing propertition with a bankruptcy case can result in fines up to \$250,000, or imprisonment for \$\$ 152, 1341, 1519, and 3571.  Signature of Debtor 1  Signature of Debtor 2  Date	Dates business existed
ars before you filed for bankruptcy, did you give a financial statement to anyone ab a, creditors, or other parties.  If in the details below.  Date issued  MM / DD / YYYY  Street  State ZIP Code  State ZIP Code  details and any attachments, and I deare true and correct. I understand that making a false statement, concealing propertition with a bankruptcy case can result in fines up to \$250,000, or imprisonment for \$\$ 152, 1341, 1519, and 3571.  Signature of Debtor 1  Signature of Debtor 2  Date	From To
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/20/17 Date	
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ttach additional pages to Yo <i>ur Statement of Financial Affairs for Individuals Filing f</i>	
	for Bankruptcy (Official Form 107)?
ay or agree to pay someone who is not an attorney to help you fill out bankruptcy fo	orms?
ame of person Attact	h the Bankruptcy Petition Preparer's Notice,

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or 1 Nikki Yuvonne Barne	a	
or 2 36, if filing) First Name Middle Name Last Nam	<u> </u>	
d States Bankruptcy Court for the: Eastern District of Virginia		
number		Check if this
own)		amended fili
official Form 108		
tatement of Intention for Inc	lividuals Filing Under Cha	apter 7 12
you are an individual filing under chapter 7, you must fill out t	his form if:	
creditors have claims secured by your property, or you have leased personal property and the lease has not ex	pired.	
ou must file this form with the court within 30 days after you fi	•	meeting of creditors,
nichever is earlier, unless the court extends the time for cause	·	•
two married people are filing together in a joint case, both are oth debtors must sign and date the form.	equally responsible for supplying correct information	n.
as complete and accurate as possible. If more space is need	led, attach a separate sheet to this form. On the top o	f any additional pages,
ite your name and case number (if known).	,	, , , , , , , , , , , , , , , , , , , ,
Part 1: List Your Creditors Who Have Secured Claim	<b>S</b>	
For any creditors that you listed in Part 1 of Schedule D: Co	reditors Who Have Claims Secured by Property (Offici	ial Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the pro as exempt on Schedu
		as exempt on conega
Creditor's	☐ Surrender the property.	□ No
name:	☐ Surrender the property. ☐ Retain the property and redeem it.	_
	☐ Retain the property and redeem it. ☐ Retain the property and enter into a	□ No
name: Description of	<ul> <li>Retain the property and redeem it.</li> <li>Retain the property and enter into a Reaffirmation Agreement.</li> </ul>	□ No
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name:  Description of property securing debt:  Creditor's	<ul> <li>Retain the property and redeem it.</li> <li>Retain the property and enter into a Reaffirmation Agreement.</li> </ul>	□ No
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Debtor 1

j	Dinn,	Yuvor	ne	B	arrera
	First Name	Middle Name		1 set Name	

Case number (If known)

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
essor's name:	□ No
Description of leased property:	☐ Yes
.essor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name:	□ No
Description of leased property:	☐ Yes
essor's name:	□ No
Description of leased property:	<b>-</b> 163
essor's name:	□ No
Description of leased property:	☐ Yes
essor's name:	□ No
Description of leased property:	☐ Yes
essor's name:	□ N <sub>0</sub>
Description of leased property:	☐ Yes
13: Sign Below	
nder penalty of perjury, I declare that I have indicated my intention ab resonal property that is subject to an unexpired lease.	out any property of my estate that secures a debt and any
Nikk M × Signature of Debt	or 2
ignature of Debtor 1 / Signature of Debt	OF 2

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Debtor 1  Debtor 2 (Spouse, if filing)  Destrict  United States Bankruptcy Court for the: Eastern District of Virginia  Case number (If known)  Deficial Form 122A—1  Chapter 7 Statement of Your Current Monthly Income  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse.    1. There is no presumption of abuse.   2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A—2).   3. The Means Test does not apply now because of qualified military service but it could apply later.    Check if this is an amended filing   Check if this is an amended filing   Check if this is an amended filing of the could apply later.    Chapter 7 Statement of Your Current Monthly Income   12/15	Fill in this information to identify your case:	Check one box only as directed in this form and in
Capture   Transmis   Lidat Name   Lidat Na	Deburg Dikky Ywongo Bamena	
Check if this is an amended filing   Telegraphy   Court of the Eastern District of Virgina	First Name Middle Name Lest Name	1. There is no presumption of abuse.
United States Barkruptry Court for the: Eastern District of Virginis    Case number   1.2.4		
Check if this is an amended filing  Check if this is an amended fi		Means Test Calculation (Official Form 122A-2).
Chapter 7 Statement of Your Current Monthly Income  Ba as complete and accurate as possible. If two married people are filling together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the file number to which the additional information applies. On the top of any additional pages, write your name and case number (if known), if you believe that you are exempted from a presumption of abuse because you do not have primarily consume dobts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under \$707(b)(2) (Official Form 122A-1Supp) with inits form.  Port 11 Calculate Your Current Monthly Income  1. What is your married and filing status? Check one only.    Not married. Fill out Column A, lines 2-11.    Married and your spouse is MOT filing with you. Fill out both Columns A and B, lines 2-11.    Living in the same household and are not legally separated. Fill out both Columns B, by checking this box, you declare under penalty of perity that you and your spouse are legally separated under nontanknuptcy law that apples or had you and your spouse are living spart for reasons that on include evening the Means Test requirements. 15, the 5-month your spouse are living spart for reasons that on include evening the Means Test requirements. 15, the 5-month your spouse are living spart for reasons that on include evening the Means Test requirements. 15, the 5-month your spouse are living spart for reasons that on include evening the Means Test requirements in the spart protection of the spart prot		
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for being accurate. If more space is needed, stach a separate sheet to this form. Include the line neumber to which the additional Information applies. On the top of any additional pages, write your mame and case number (if known), if you believe that you are exempled from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under's \$70(b)(2) (Official Form 122A-154pp) with this form.    Not married. File out Column A, lines 2-11.     Married and your spouse is NOT filling with you. You and your spouse are:     Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.     White pages are presented by the property out of the presented of the pres		☐ Check if this is an amended filing
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for being accurate. If more space is needed, stach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional page, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under \$700(8)2) (Official Form 122A-15upp) with this form.    Ontificial Provides of the Column A. lines 2-11.   Ontificial Provides of the Column A. li	Official Form 122A-1	
space is needed, attach a separate sheet to this form. Include the line number to which the additional pages, write your name and case number (if known). If you believe that you are exempted from a promption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)/21 (Official Form 122A-1Supp) with this form.  Part 1: Calculate Your Current Monthly Income  1. What is your marital and filing status? Check one only.  Not married. Fill out Column A, lines 2-11.  Married and your spouse is NOT filing with you. Fill out both Columns A and B, lines 2-11.  Living in the same household and are not legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankrupto; but that applies or that you and your spouse are legally separated under nonbankrupto; but that applies or that you and your spouse are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated. Fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated. Fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated. Fill out Column B. By checking this box, you declare under penalty of penalty	<b>Chapter 7 Statement of Your Current Mont</b>	hly Income 12/15
Not married. Fill out Column A, lines 2-11.  Married and your spouse is NIIfing with you. Fill out both Columns A and B, lines 2-11.  Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.  Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perium that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 107(b)(7)(B).  Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this benkruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the G-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the Income for all 6 months and divide the total by 6.  Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write 50 in the space.  Column A Column B Debtor 1 Debtor 2 or non-filling spouse  2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).  3. Allmony and maintenance payments. Do not include payments from a spouse if Column B is filled in.  4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from an unmarried partner, members of your bousehold, your dependents, parents, and roommates. Including regular contributions from a pouse only	space is needed, attach a separate sheet to this form. Include the line number to whice additional pages, write your name and case number (if known). If you believe that you do not have primarily consumer debts or because of qualifying military service, compabuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.	th the additional information applies. On the top of any
Married and your spouse is filling with you. Fill out both Columns A and B, lines 2-11.  Married and your spouse is NOT filling with you. You and your spouse are:  Living in the same household and are not legally separated. Fill out Column A and B, lines 2-11.  Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated. Fill out Column A lines 2-11; do not fill out Column B. By checking this box, you declare under nonbankruptcy law that applies or that you and your spouse are legally separated. Fill out Column B. By checking this box, you declare under nonbankruptcy law that applies or that you and your spouse are legally separated. Fill out Column B. Exposure that you and your spouse are legally separated. Fill out Column B is fill out Column B in the spouse.  Column B is filled in. C	What is your marital and filling status? Check one only.	
Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.  Living in the same household and are not legally separated. Fill out Column A, lines 2-11. On tot fill out Column B, by checking this box, you declare under penalty of perfury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are level from all sources, derived during the 6 full months before you file this benkruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month pendod would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.  Column A Debtor 1  Debtor 2 or non-filling spouse  2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).  3. Allmony and maintenance payments. Do not include payments from a spouse if Column B is filled in.  4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and recommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.  Net Income from operating a business, profession, or farm  Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Net monthly income from rental or other real property  Debtor 2  Copy  Net monthly income from renta		2-11.
Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).  Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the spouse.  Column B better 1 Debtor 2 or non-filing spouse  2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).  3. Allmony and maintenance payments. Do not include payments from a spouse if Column B is filled in.  4. All amounts from any source which are regularly paid for household expenses of you or your dependents, parter, members of your household, your dependents, parents, and roommates, include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.  5. Net Income from operating a business, profession, or farm  Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Net monthly income from rental and other real property  Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Net monthly income from rental or other real property  Source of the fill during the full better 1 Debtor 2 Source 1 Debtor 2 Source 1 Debtor 2 Source 1 Debtor 2 Source 1 D		
under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).  Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income avanied during the 6 months, and the income for all 6 months and vivide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.  Column A Debtor 1 Debtor 2 or non-filling spouse  2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).  3. Allmony and maintenance payments. Do not include payments from a spouse if Column B is filled in.  4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.  5. Net Income from operating a business, profession, or farm \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Living in the same household and are not legally separated. Fill out both 0	Columns A and B, lines 2-11.
bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 8-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.    Column A Debtor 1 Debtor 2 or non-filing spouse	under penalty of perjury that you and your spouse are legally separated under	nonbankruptcy law that applies or that you and your
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).  3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.  4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.  5. Net income from operating a business, profession, or farm Gross receipts (before all deductions) Ordinary and necessary operating expenses  Net monthly income from rental and other real property Gross receipts (before all deductions) Ordinary and necessary operating expenses  Net monthly income from rental and other real property Gross receipts (before all deductions)  Solution  Copy here  \$ Copy here  \$ Solution  Copy here  \$ Solution  Copy here  Solution  Copy here  Solution  Copy here  Solution  Solution  Copy here  Solution  Copy here	bankruptcy case. 11 U.S.Č. § 101(10A). For example, if you are filing on September 1 August 31. If the amount of your monthly income varied during the 6 months, add the ir Fill in the result. Do not include any income amount more than once. For example, if both	15, the 6-month period would be March 1 through noome for all 6 months and divide the total by 6. oth spouses own the same rental property, put the
(before all payroli deductions).  3. Allmony and maintenance payments. Do not include payments from a spouse if Column B is filled in.  4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.  5. Net Income from operating a business, profession, or farm  Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Net monthly income from rental and other real property  Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Net monthly income from rental or other real property  Net monthly income from rental or other real property  Net monthly income from rental or other real property  Scopy  S		Column A Column B Debtor 1 Debtor 2 or
Column B is filled in.  4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.  5. Net income from operating a business, profession, or farm  Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Net monthly income from a business, profession, or farm  Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Net income from rental and other real property  Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Net monthly income from rental or other real property  Scopy		\$ 2160 s
of you or your dependents, Including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.  5. Net Income from operating a business, profession, or farm  Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Net monthly income from a business, profession, or farm  6. Net income from rental and other real property  Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Net monthly income from rental or other real property  Sometime from rental or other real property  So		s/67,00 s
or farm Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Net monthly income from a business, profession, or farm  6. Net income from rental and other real property Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Net monthly income from rental or other real property  Net monthly income from rental or other real property  S  Copy here  \$  S  Copy here  \$  S  S  S  S  S  S  S  S  S  S  S  S	of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not	\$
Ordinary and necessary operating expenses - \$ \$ \$		
Net monthly income from a business, profession, or farm \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		
6. Net income from rental and other real property Gross receipts (before all deductions) Ordinary and necessary operating expenses  Net monthly income from rental or other real property  S  Copy here  \$	Con	
Ordinary and necessary operating expenses - \$\frac{Q}{2} - \$\frac{Copy}{here} \\$ \$	- IIII	V
Net monthly income from rental or other real property \$\int_{\text{here}}\$ \$\text{Copy} \text{here} \$\text{\$}\$	· · · · · · · · · · · · · · · · · · ·	
4	Not monthly income from routel or other real property	
	\$20 5 Here	\$

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ebtor 1 <u>DIKK, Yuvome</u> Br First Name Middle Name Last Name	7 mera	Case number (# known)_	
,		Column A Debtor 1	Column B Debtor 2 or non-filing spouse
8. Unemployment compensation		s B	\$
Do not enter the amount if you contend that the arrunder the Social Security Act. Instead, list it here:		<u> </u>	· · · · · · · · · · · · · · · · · · ·
For you			
For your spouse	\$		
<ol> <li>Pension or retirement income. Do not include an benefit under the Social Security Act.</li> </ol>	•	\$ <u></u>	\$
10. Income from all other sources not listed above. Do not include any benefits received under the Soc as a victim of a war crime, a crime against humanit terrorism. If necessary, list other sources on a sepa	cial Security Act or payments rece y, or international or domestic		
		\$ B	\$
		\$ <u></u>	\$
Total amounts from separate pages, if any.		+ \$	+ \$
Calculate your total current monthly income. Accolumn. Then add the total for Column A to the total		\$ <u>232</u> 7	+ [2322]
Part 2: Determine Whether the Means Tes	t Applies to You		Total current monthly income
2. Calculate your current monthly income for the y	ear. Follow these steps:		
12a. Copy your total current monthly income from	•	Co	py line 11 here→ \$2327
Multiply by 12 (the number of months in a ye			x 12
12b. The result is your annual income for this part	•		12b. \$27924
3. Calculate the median family income that applies	s to you. Follow these steps:		
Fill in the state in which you live.	60,713		
Fill in the number of people in your household.	3		
Fill in the median family income for your state and a To find a list of applicable median income amounts			13 \$81,369
instructions for this form. This list may also be avail			
4. How do the lines compare?			
14a. Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, check box 1,	There is no presumption	n of abuse.
14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2, The presi	umption of abuse is dete	rmined by Form 122A-2.
Part 3: Sign Below			
By signing here, I declare under penalty of	perjury that the information on thi	is statement and in any a	attachments is true and correct.
* Mikk Bane	×	•	
Signature of Debtor 1		Signature of Debtor 2	
Date 3 /20 //7		Date MM / DD / YYYY	_
If you checked line 14a, do NOT fill out	or file Form 122A–2.		
If you checked line 14h, fill out Form 12			

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Fill in this information to identify your case:	Check the appropriate box as disested in lines 40 or 42:
Debtor 1 Dikki Yuvone Barrera First Name Middle Name Last Name	According to the calculations required by this Statement:
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	1. There is no presumption of abuse.
United States Bankruptcy Court for the: Eastern District of Virginia	2. There is a presumption of abuse.
Case number	
(If known)	Check if this is an amended filing
<u></u>	
Official Form 122A–2	
Chapter 7 Means Test Calculation	12/15
To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current M.	onthiv income (Official Form 122A-1).
Be as complete and accurate as possible. If two married people are filing together, both are equal is needed, attach a separate sheet to this form. Include the line number to which the additional infipages, write your name and case number (if known).  Part 1: Determine Your Adjusted Income	
Copy your total current monthly income	al Form 122A-1 here→
2. Did you fill out Column B in Part 1 of Form 122A-1?	
No. Fill in \$0 for the total on line 3.	
Yes. Is your spouse filing with you?	
No. Go to line 3.	
Yes. Fill in \$0 for the total on line 3.	
Adjust your current monthly income by subtracting any part of your spouse's income not used household expenses of you or your dependents. Follow these steps:	to pay for the
On line 11, Column B of Form 122A–1, was any amount of the income you reported for your spouse N regularly used for the household expenses of you or your dependents?	ЮТ
No. Fill in 0 for the total on line 3.	
Yes. Fill in the information below:	
State each purpose for which the income was used  For example, the income is used to pay your spouse's tax debt or to support people other than you or your dependents  Fill in the amount you are subtracting from your spouse's income	
\$	
<u> </u>	
+ <u>\$</u>	
Total\$	Copy total here→ -\$
4. Adjust your current monthly income. Subtract the total on line 3 from line 1.	,2327

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Debtor 1

n	ikk	i Yuro	กกะ	Barrera	
First	Name	Middle Name		Last Name	

Case number (if known)

Part 2:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of Form 122A–1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.



National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.



7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

#### People who are under 65 years of age

7a. Out-of-pocket health care allowance per person



7b. Number of people who are under 65



7c. Subtotal. Multiply line 7a by line 7b.



#### People who are 65 years of age or older

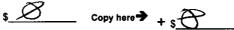
7d. Out-of-pocket health care allowance per person



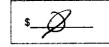
7e. Number of people who are 65 or older



7f. Subtotal. Multiply line 7d by line 7e.



7g. Total. Add lines 7c and 7f.....



Copy total here



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or 1 Pigt Name Barrera Case number (# known)

			········			
Local Standards You must use the IRS	S Local Standards to ar	nswer the questions in	lines 8-15.			
Based on information from the IRS, the U. bankruptcy purposes into two parts:	.S. Trustee Program h	as divided the IRS L	ocal Standa	rd for housing for		
<ul> <li>Housing and utilities – Insurance and of Housing and utilities – Mortgage or ren</li> </ul>	. • •					
To answer the questions In lines 8-9, use	the U.S. Trustee Prog	ram chart.				
To find the chart, go online using the link spe This chart may also be available at the bank		nstructions for this for	n.			
Housing and utilities – Insurance and dollar amount listed for your county for in-						\$
9. Housing and utilities - Mortgage or rea	nt expenses:					
9a. Using the number of people you enter for your county for mortgage or rent e				\$		
9b. Total average monthly payment for al	mortgages and other of	debts secured by your	home,			
To calculate the total average monthly contractually due to each secured crebankruptcy. Then divide by 60.						
Name of the creditor		Average monthly payment				
<u>-</u>		\$				
		\$				
		+ s				
<del>-</del>			٦.		Repeat this	
Total average	monthly payment	\$	Copy here	<b>-</b> \$	amount on line 33a.	•
9c. Net mortgage or rent expense.			Γ		Сору	_
Subtract line 9b (total average monti rent expense). If this amount is less	hly payment) from line stan \$0, enter \$0	9a (mortgage or		\$	here	<b>\$</b> _
10. If you claim that the U.S. Trustee Prog the calculation of your monthly expens				s incorrect and aff	ects	\$
Explain						
why:					<del></del> -	
11. Local transportation expenses: Check t	the number of vehicles	for which you claim or	a ourombin e	or operating owners		
0, Go to line 14.	ne number of vertices	ioi wiicii you ciaiiii ai	r ownership (	or operating expens	<b>c</b> .	
1. Go to line 12.						
2 or more. Go to line 12.						
12. Vehicle operation expense: Using the li						
operating expenses, fill in the Operating (	Costs that apply for you	r Census region or me	etropolitan sta	atistical area.	!	\$

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Dih	h, Woon	re PSF	mera
First Name	Middle Name	Last Name	

Case number (if known)	

Vehi	icle 1	Describe Vehicle 1:						
		-						
13a.	Owner	ship or leasing costs us	ing IRS Local Stand	ard		\$		
13b.	Averag	ge monthly payment for	all debts secured by	Vehicle 1.				
	Do not	include costs for leased	d vehicles.					
	amoun	culate the average mont its that are contractually ou filed for bankruptcy.	due to each secure		nths			
	Na	me of each creditor for V	ehicle 1	Average monthly payment				
				\$				
		<del></del>		+ \$				
		Total average	monthly payment	\$	Copy here→	- s	Repeat this amount on	
		-			nere 2		line 33b.	
130							Copy net	
136.	Not Vot	nicle 1 Aumorobin or lone	eo ovnonco					
		nicle 1 ownership or leas at line 13b from line 13a.	•	s than \$0, enter \$0		\$	Vehicle 1 expense	s
		•	. If this amount is les	ss than \$0, enter \$0		\$	Vehicle 1	\$
Vehic	Subtraction Subtraction	ct line 13b from line 13a.  Describe Vehicle 2:	. If this amount is les	ard			Vehicle 1 expense	\$
Vehic	Subtract  Icle 2  Owner  Average	ot line 13b, from line 13a.  Describe Vehicle 2:	. If this amount is les	ard			Vehicle 1 expense	\$
Vehic	Subtract  Icle 2  Owner  Average Do not	ct line 13b, from line 13a.  Describe Vehicle 2:  ship or leasing costs using monthly payment for	ing IRS Local Stand	ard			Vehicle 1 expense	\$
Vehic	Subtract  Icle 2  Owner  Average Do not	ct line 13b from line 13a.  Describe Vehicle 2:  ship or leasing costs using monthly payment for linclude costs for leased	ing IRS Local Stand	ard Vehicle 2.  Average monthly			Vehicle 1 expense	\$
Vehic	Subtract  Icle 2  Owner  Average Do not	ct line 13b from line 13a.  Describe Vehicle 2:  ship or leasing costs using monthly payment for linclude costs for leased	ing IRS Local Stand	ard Vehicle 2.  Average monthly			Vehicle 1 expense	\$
Vehic	Subtract  Icle 2  Owner  Average Do not	ct line 13b from line 13a.  Describe Vehicle 2:  ship or leasing costs using monthly payment for linclude costs for leased	ing IRS Local Stand	ard Vehicle 2.  Average monthly			Vehicle 1 expense	\$
Vehic	Subtract  Icle 2  Owner  Average Do not	t line 13b from line 13a.  Describe Vehicle 2:  ship or leasing costs using monthly payment for a include costs for leased me of each creditor for Vehicle 1	ing IRS Local Stand	ard Vehicle 2.  Average monthly			Repeat this amount on	\$
Vehic	Subtract  Icle 2  Owner  Average Do not	t line 13b from line 13a.  Describe Vehicle 2:  ship or leasing costs using monthly payment for a include costs for leased me of each creditor for Vehicle 1	ing IRS Local Stand all debts secured by d vehicles.	ard Vehicle 2.  Average monthly	Copy		Repeat this amount on line 33c.	\$
Vehic 13d. 13e.	Owner Averag Do not Na	Describe Vehicle 2: ship or leasing costs using monthly payment for include costs for leased me of each creditor for Vehicle 2 ownership or leased nicle 2 ownership or leased	ing IRS Local Stand all debts secured by d vehicles.	ard Vehicle 2.  Average monthly payment  \$  + \$	Copy here→		Repeat this amount on line 33c.  Copy net Vehicle 2	\$
Vehic 13d. 13e.	Owner Averag Do not Na	t line 13b from line 13a.  Describe Vehicle 2:  ship or leasing costs using monthly payment for a include costs for leased me of each creditor for Ventage.	ing IRS Local Stand all debts secured by d vehicles.	ard Vehicle 2.  Average monthly payment  \$  + \$	Copy here→		Repeat this amount on line 33c.  Copy net	\$\$
Vehic 13d. 13e.	Owner Averag Do not Na	Describe Vehicle 2: ship or leasing costs using monthly payment for include costs for leased me of each creditor for Vehicle 2 ownership or leased nicle 2 ownership or leased	ing IRS Local Stand all debts secured by d vehicles. ehicle 2 e monthly payment se expense his amount is less the	ard Vehicle 2.  Average monthly payment  \$  + \$  \$ an \$0, enter \$0	Copy here	\$	Repeat this amount on line 33c.  Copy net Vehicle 2 expense	\$\$

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Dikki Vvonne Barrera Case number (#known)	
In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.	
s: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self- younger taxes, Social Security taxes, and Medicare taxes. You may include the monthly amount withheld from your for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and act that number from the total monthly amount that is withheld to pay for taxes. It include real estate, sales, or use taxes.	<u>8</u> _
untary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, dues, and uniform costs.  It include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	8
tribudge amounts that are not required by your job, such as voluntary 401(n) contributions of paylon savings.	
nsurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing ter, include payments that you make for your spouse's term life insurance. Do not include premiums for life term ince on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	24
-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative by, such as spousal or child support payments.	<b>*</b>
t include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	<u></u>
ation: The total monthly amount that you pay for education that is either required:	
a condition for your job, or	8
your physically or mentally challenged dependent child if no public education is available for similar services.	
ور care: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.	
t include payments for any elementary or secondary school education.	200
ional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that uired for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a savings account. Include only the amount that is more than the total entered in line 7. ents for health insurance or health savings accounts should be listed only in line 25.	1.95
nal telephones and telephone services: The total monthly amount that you pay for telecommunication services for nd your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone e, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it reimbursed by your employer.	<u>0.</u> 0
t include payments for basic home telephone, internet and cell phone service. Do not include self-employment ses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.	
ill of the expenses allowed under the IRS expense allowances.	
nes 6 through 23.	
·	\$

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nikk	; Kvor	ne P	Amera
First Name	Middle Name	Last Name	

Case number (if known)	

Additional Expense Deductions  These are additional deductions allowed by the Means Test.  Note: Do not include any expense allowances listed in lines 6-24.	
25. <b>Health insurance, disability insurance, and health savings account expenses.</b> The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.	
Health insurance \$	
Disability insurance \$	
Health savings account + \$	$\sim$
Total \$ Copy total here→	3
Do you actually spend this total amount?	
No. How much do you actually spend?  Yes	
26. Continuing contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b).	\$
27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.	\$
By law, the court must keep the nature of these expenses confidential.	
28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8.	
If you believe that you have home energy costs that are more than the home energy costs included in expenses on line	
8, then fill in the excess amount of home energy costs. You must give your case trustee documentation of your actual expenses, and you must show that the additional amount	\$
claimed is reasonable and necessary.	
29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$156.25* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school.	\$
You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.	<u> </u>
* Subject to adjustment on 4/01/16, and every 3 years after that for cases begun on or after the date of adjustment.	
30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.	<b>\$</b> _
To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.	
You must show that the additional amount claimed is reasonable and necessary.	
31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 26 U.S.C. § 170(c)(1)-(2).	+ \$
32. Add all of the additional expense deductions. Add lines 25 through 31.	\$

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Dink.	JUVON	re Ban	era.
First Name	Middle Name	Last Name	

Case number (d known)		

)eductio	ons for Debt Payment						
	nis to book rayinein						
3. For de	ebts that are secured by an i	interest in property that	you own, incl	uding home mo	ortgages, vehicle		
	, and other secured debt, fill	_		etroctually due to	n nach nacurad		
	Iculate the total average month or in the 60 months after you fi			miracidally due id	o each secured	1	
					Average monthly		
	Mortgages on your home:				payment		
33a.	Copy line %b here			<b>&gt;</b>	\$	<del></del>	
	Loans on your first two veh	icles:					
33b.	Copy line 13b here			<b></b>	\$	_	
33c.	Copy line 13e here			<b>→</b>	\$		
33d.	List other secured debts:						
	Name of each creditor for oth	er Identify proper	tv that	Does payment			
	secured debt	secures the de		include taxes or insurance?			
				☐ No	\$		
				∐ Yes —	·	•	
				☐ No	\$		
				☐ Yes	<b>V</b>	-	
				☐ Yes	<b>V</b>	-	
				Yes No Yes	+ \$		
33e. To	otal average monthly payment.	Add lines 33a through 33	d	□ No □ Yes	+ \$	Copy total	\$
33e. To	otal averagę monthly payment.	Add lines 33a through 33	d	□ No □ Yes	+ \$	Copy total	\$
34. Are ar	ny debts that you listed in lir	ne 33 secured by your pr	imary resider	No Yes	+ \$		\$
34. Are ar or oth	ny debts that you listed in liner property necessary for yo	ne 33 secured by your pr	imary resider	No Yes	+ \$		\$
34. Are ar or oth	ny debts that you listed in liner property necessary for you. Go to line 35.	ne 33 secured by your pr our support or the suppo	rimary resider ort of your de	No Yes	+ \$		\$
34. Are ar or oth	ny debts that you listed in liner property necessary for you.  Go to line 35.  State any amount that you listed in line 33, to keep po	ne 33 secured by your prour support or the support or the support or the support or the support of the support	rimary resider ort of your de addition to the (called the <i>cur</i>	No Yes  The receive of the receive o	+ \$		\$ <u>.</u>
34. Are ar or oth	ny debts that you listed in Ilr ner property necessary for yo o. Go to line 35. es. State any amount that you	must pay to a creditor, in a session of your property in the information below.	rimary resider ort of your de addition to the (called the <i>cur</i>	No Yes  nce, a vehicle, pendents?  payments e amount).	Monthly cure		\$
34. Are ar or oth	ny debts that you listed in liner property necessary for you.  D. Go to line 35.  es. State any amount that you listed in line 33, to keep poon Next, divide by 60 and fill in	ne 33 secured by your prour support or the support or the support or the support or the support of the information below.	rimary resider ort of your de addition to the (called the <i>cur</i>	No Yes  nce, a vehicle, pendents?  payments e amount).			\$
34. Are ar or oth	ny debts that you listed in liner property necessary for you.  D. Go to line 35.  es. State any amount that you listed in line 33, to keep poon Next, divide by 60 and fill in	must pay to a creditor, in a session of your property in the information below.	rimary resider ort of your de addition to the (called the <i>cur</i>	No Yes  The receive of the receive o	Monthly cure		\$
34. Are ar or oth	ny debts that you listed in liner property necessary for you.  D. Go to line 35.  es. State any amount that you listed in line 33, to keep poon Next, divide by 60 and fill in	must pay to a creditor, in a session of your property in the information below.	rimary resider ort of your de addition to the (called the <i>cur</i>	No Yes  The receive of the receive o	Monthly cure		\$
34. Are ar or oth	ny debts that you listed in liner property necessary for you.  D. Go to line 35.  es. State any amount that you listed in line 33, to keep poon Next, divide by 60 and fill in	must pay to a creditor, in a session of your property in the information below.	rimary resider ort of your de addition to the (called the <i>cur</i>	No Yes  The receive of the receive o	Monthly cure	here →	\$
34. Are ar or oth	ny debts that you listed in liner property necessary for you.  D. Go to line 35.  es. State any amount that you listed in line 33, to keep poon Next, divide by 60 and fill in	must pay to a creditor, in a session of your property in the information below.	rimary resider ort of your de addition to the (called the <i>cur</i>	No Yes  The receive of the receive o	Monthly cure		\$\$
A. Are ar or oth	ny debts that you listed in liner property necessary for you.  o. Go to line 35. es. State any amount that you listed in line 33, to keep por Next, divide by 60 and fill in Name of the creditor	must pay to a creditor, in a seession of your property in the information below.  Identify property that secures the debt	rimary resider ort of your de addition to the (called the cur  Total cure amount  \$ \$ \$	No Yes  Ince, a vehicle, pendents?  payments e amount).  + 60 = + 60 = + 60 = Total	Monthly cure	here→	\$ \$
A. Are are or oth	ny debts that you listed in liner property necessary for you.  D. Go to line 35.  es. State any amount that you listed in line 33, to keep poon Next, divide by 60 and fill in	must pay to a creditor, in a session of your property in the information below.  Identify property that secures the debt	rimary resider ort of your de addition to the (called the cur  Total cure amount  \$	No Yes  Ince, a vehicle, pendents?  payments a amount).  + 60 = + 60 = Total  alimony —	Monthly cure	here→	\$ \$
A. Are are or other o	ny debts that you listed in liner property necessary for you.  o. Go to line 35. es. State any amount that you listed in line 33, to keep por Next, divide by 60 and fill in Name of the creditor  ou owe any priority claims sure past due as of the filing do Go to line 36.	must pay to a creditor, in a session of your property in the information below.  Identify property that secures the debt	rimary resider ort of your de addition to the (called the cur  Total cure amount  \$	No Yes  Ince, a vehicle, pendents?  payments amount).  + 60 =  + 60 =  Total  alimony —  C. § 507.	Monthly cure	here→	\$ \$
A. Are are or other o	ny debts that you listed in liner property necessary for you.  o. Go to line 35.  es. State any amount that you listed in line 33, to keep por Next, divide by 60 and fill in Name of the creditor	must pay to a creditor, in a seession of your property in the information below.  Identify property that secures the debt  Ich as a priority tax, chill ate of your bankruptcy of	rimary resider ort of your de addition to the (called the cur  Total cure amount  \$	No Yes  Ince, a vehicle, pendents?  payments amount).  + 60 =  + 60 =  Total  alimony —  C. § 507.	Monthly cure	here→	\$ \$

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or 1 Pitch Vivonne Barneya Case number (#known)

						<del> </del>
<ol> <li>Are you eligible to file a case For more information, go online instructions for this form. Bankn</li> </ol>	using the link for Bankrup	otcy Basics specified in the sep	oarate erk's office.			
No. Go to line 37.						
Yes. Fill in the following inform	nation.					
Projected monthly plan	payment if you were filing	under Chapter 13	\$			
Administrative Office of	ur district as stated on the the United States Courts e Executive Office for Uni	e list issued by the (for districts in Alabama and ited States Trustees (for all	x			
	arate instructions for this f	ur district, go online using the form. This list may also be			٦	
Average monthly admin	istrative expense if you w	ere filing under Chapter 13	\$		Copy total	\$
37. Add all of the deductions for de Add lines 33e through 36	ebt payment.					\$
Total Deductions from Income						
38. Add all of the allowed deduction	ns.					
Copy line 24, All of the expenses a expense allowances		\$				
Copy line 32, All of the additional e	expense deductions	\$				
Copy line 37, All of the deductions	for deht navment	+ \$				
oopy mile or, , in or the leading	, ,	•	Conv total h	ere	_	œ
	Total deductions	<b>3</b>	COPY IOLAI III	ere	······································	Φ
Part 3: Determine Whether	There Is a Presumpti	ion of Abuse				
39. Calculate monthly disposable i	ncome for 60 months	·· •				
39a. Copy line 4, adjusted curre	nt monthly income	\$				
зэь. Copy line 38, Total deduction	ons	- \$				
39c. Monthly disposable income Subtract line 39b from line	- · · · · · · · · · · · · · · · · · · ·	\$	Copy here→	\$		
For the next 60 months (5	years)			x 60		
39d. Total. Multiply line 39c by 6	80		······································	\$	Copy here →	\$
				***************************************		•
40. Find out whether there is a pres	_	ck the box that applies:  1 of this form, check box 1, <i>Th</i>	ere is no pre	sumption of a	abuse. Go	
to Part 5.						
The line 39d is more than \$ may fill out Part 4 if you claim		ge 1 of this form, check box 2, hen go to Part 5.	There is a pr	esumption of	abuse. You	
☐ The line 39d is at least \$7,4	75*, but not more than \$	12,475*. Go to line 41.				
Subject to adjustment on w	/01/16, and every 3 years	after that for cases filed on or	after the date	e of adjustme	nt.	

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41a. Fill in the amount of your total nonpriority unsecured debt. If you filled out A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form	······	A WALP CONTROL OF THE PARTY OF	
	x .25	<del></del>	
41b. 25% of your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(l).  Multiply line 41a by 0.25	<b></b>	Copy here →	\$
Determine whether the income you have left over after subtracting all allowed deductions is enough to pay 25% of your unsecured, nonpriority debt.  Check the box that applies:	S		
Line 39d is less than line 41b. On the top of page 1 of this form, check box 1, There is no Go to Part 5.	presumption of abuse	9.	
Line 39d is equal to or more than line 41b. On the top of page 1 of this form, check box 2 of abuse. You may fill out Part 4 if you claim special circumstances. Then go to Part 5.	, There is a presump	tion	
<u> </u>			
4: Give Details About Special Circumstances		· · · · · · · · · · · · · · · · · · ·	
o you have any special circumstances that justify additional expenses or adjustments of co pasonable alternative? 11 U.S.C. § 707(b)(2)(B).	urrent monthly Incom	me for which th	ere is no
No. Go to Part 5.			
the property of the contract o			
Yes. Fill in the following information. All figures should reflect your average monthly expense or for each item. You may include expenses you listed in line 25.	income adjustment		
	s or income		
for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances that make the expenses adjustments necessary and reasonable. You must also give your case trustee documental	s or income		
for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances that make the expenses adjustments necessary and reasonable. You must also give your case trustee documentate expenses or income adjustments.	s or income ion of your actual Average mon		
for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances that make the expenses adjustments necessary and reasonable. You must also give your case trustee documentate expenses or income adjustments.	s or income ion of your actual Average mon		
for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances that make the expenses adjustments necessary and reasonable. You must also give your case trustee documentate expenses or income adjustments.	s or income ion of your actual Average mon		
for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances that make the expenses adjustments necessary and reasonable. You must also give your case trustee documentate expenses or income adjustments.	s or income ion of your actual Average mon		
for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances that make the expenses adjustments necessary and reasonable. You must also give your case trustee documentate expenses or income adjustments.	s or income ion of your actual Average mon		
for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances that make the expenses adjustments necessary and reasonable. You must also give your case trustee documentate expenses or income adjustments.	s or income ion of your actual Average mon		
for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances that make the expenses adjustments necessary and reasonable. You must also give your case trustee documentat expenses or income adjustments.  Give a detailed explanation of the special circumstances	s or income ion of your actual Average mon		
for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances that make the expenses adjustments necessary and reasonable. You must also give your case trustee documentat expenses or income adjustments.  Give a detailed explanation of the special circumstances	s or income ion of your actual  Average mon or income ad  \$	Justment	ect.
for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances that make the expenses adjustments necessary and reasonable. You must also give your case trustee documentat expenses or income adjustments.  Give a detailed explanation of the special circumstances  Sign Below  By signing here, I declare under penalty of perjury that the information on this statement ar	s or income ion of your actual  Average mon or income ad  \$	Justment	ect.
for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances that make the expenses adjustments necessary and reasonable. You must also give your case trustee documentate expenses or income adjustments.  Give a detailed explanation of the special circumstances  Sign Below  By signing here, I declare under penalty of perjury that the information on this statement are the special circumstances.	S or income sion of your actual  Average mon or income ad  \$ \$ \$  \$ and in any attachments	Justment	ect.
for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances that make the expenses adjustments necessary and reasonable. You must also give your case trustee documentat expenses or income adjustments.  Give a detailed explanation of the special circumstances  Sign Below  By signing here, I declare under penalty of perjury that the information on this statement ar	S or income sion of your actual  Average mon or income ad  \$ \$ \$  \$ and in any attachments	Justment	ect.

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Fill in this information to identify your case:	•
Debtor 1 Nikki Krone Barnere	1
First Name Middle Name Last Name  Debtor 2	
(Spouse, if filing) First Name Middle Name Last Name	Í
United States Bankruptcy Court for the: Eastern District of Virginia	
Case number(If known)	
	☐ Check if this is an amended filing
Official Form 122A—1Supp	
Statement of Exemption from Presumption	n of Abuse Under § 707(b)(2) 12/1
File this supplement together with Chapter 7 Statement of Your Current Monthly is exempted from a presumption of abuse. Be as complete and accurate as possible exclusions in this statement applies to only one of you, the other person should required by 11 U.S.C. § 707(b)(2)(C).	e. If two married people are filing together, and any of the
Part 1: Identify the Kind of Debts You Have	
<ol> <li>Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S personal, family, or household purpose." Make sure that your answer is consistent wi Individuals Filing for Bankruptcy (Official Form 101).</li> </ol>	
No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, <i>There is</i> submit this supplement with the signed Form 122A-1.	no presumption of abuse, and sign Part 3. Then
Yes. Go to Part 2.	
Part 2: Determine Whether Military Service Provisions Apply to You	
2. Are you a disabled veteran (as defined in 38 U.S.C. § 3741(1))?	
No. Go to line 3.	
Yes. Did you incur debts mostly while you were on active duty or while you were 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).	performing a homeland defense activity?
No. Go to line 3.	
Yes. Go to Form 122A-1; on the top of page 1 of that form, check box 1, Then submit this supplement with the signed Form 122A-1.	There is no presumption of abuse, and sign Part 3.
3. Are you or have you been a Reservist or member of the National Guard?	
No. Complete Form 122A-1. Do not submit this supplement.	
Yes. Were you called to active duty or did you perform a homeland defense active	ity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
No. Complete Form 122A-1. Do not submit this supplement.	
Yes. Check any one of the following categories that applies:	
I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.	If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1,
☐ I was called to active duty after September 11, 2001, for at least	check box 3, The Means Test does not apply now, and sign Part 3. Then submit this supplement with the signed
90 days and was released from active duty on, which is fewer than 540 days before I file this bankruptcy case.	Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The
l am performing a homeland defense activity for at least 90 days.	exclusion period means the time you are on active duty
I performed a homeland defense activity for at least 90 days,	or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).
ending on, which is fewer than 540 days before I file this bankruptcy case.	If your exclusion period ends before your case is closed, you may have to file an amended form later.